



Clinical and Pathological Characteristics of an Uncommon Cardiac Tumor in Atrial Myxoma

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DESCRIPTION

Atrial myxoma is a rare type of benign tumour that originates in the heart. While benign, it can have serious implications on cardiac function and can even be life-threatening if not treated promptly. Atrial myxomas typically develop in the atrial chambers of the heart, most commonly in the left atrium. They are composed of connective tissue cells and mucopolysaccharides, forming gelatinous masses. Histologically, atrial myxomas are composed of stellate or spindle-shaped cells embedded in an amorphous mucopolysaccharides-rich matrix. Immunohistochemical studies often show positive staining for vimentin, CD34, and desmin, confirming the mesenchymal origin of the cells.

Atrial myxomas are noncancerous, gelatinous masses that develop within the atria of the heart, most commonly in the left atrium. These tumours typically have a stalk or pedicle that attaches them to the atrial wall. Atrial myxomas are considered benign, meaning they do not spread to other parts of the body. However, their location within the heart can lead to serious cardiovascular complications. The exact cause of atrial myxoma is not well understood. These tumours are thought to develop from mesenchymal cells, which are connective tissue cells found within the heart. While most atrial myxomas occur sporadically, there are a small percentage of cases associated with a genetic predisposition. Atrial myxomas can present with a variety of symptoms, depending on their size, location, and whether they obstruct blood flow. Unexplained weight loss may occur. Low-grade fever and night sweats in some cases.

A healthcare provider will review the patient's medical history, inquire about symptoms, and perform a physical examination to assess for signs of heart abnormalities. Echocardiography (Echo) is the primary imaging tool for diagnosing atrial myxoma. It uses sound waves to visualize the tumour's size, location, and movement within the heart. In some cases, a Transesophageal Echocardiography (TE) may be performed to obtain a more detailed and clear view of the tumour. Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) can provide

additional information about the tumour's characteristics and location. The primary treatment for atrial myxoma is surgical removal, which is typically curative. The surgical approach involves open-heart surgery, and the tumour is excised while preserving the surrounding cardiac tissue. Open-heart surgery, known as a myxoma excision, is the standard treatment for atrial myxoma. The goal is to remove the tumour entirely while minimizing damage to surrounding structures. In some cases, minimally invasive approaches may be used, such as robot-assisted surgery or Video-Assisted Thoracoscopic Surgery (VATS), to access and remove the tumour. After surgical removal, patients will require regular follow-up appointments with a cardiologist to monitor heart function and assess for potential recurrence. The prognosis for individuals with atrial myxoma is generally favourable following successful surgical removal. Most patients experience complete resolution of their symptoms and can return to their normal activities with no long-term complications. However, if left untreated, atrial myxomas can lead to severe complications, including embolism (tumour fragments traveling through the bloodstream), heart failure, or sudden cardiac death. Therefore, early diagnosis and prompt surgical intervention are critical for a positive outcome.

Atrial myxomas usually originate from the fossa ovalis, a region in the septum of the heart. They tend to grow within the atrial cavity, often attached to the interatrial septum by a stalk. Over time, the tumour can obstruct blood flow through the mitral or tricuspid valve, leading to a variety of symptoms. Additionally, the irregular surface of the tumour can cause blood clots, resulting in embolic events.

Atrial myxoma is a rare cardiac tumour that can mimic the symptoms of various heart conditions, making it a challenging diagnosis. While these tumours are typically benign, they have the potential to cause life-threatening complications due to their location within the heart. Timely diagnosis through medical imaging and surgical removal is essential for ensuring a positive prognosis and the restoration of a patient's quality of life. Increased awareness of atrial myxoma among healthcare

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providers and the public can contribute to early detection and successful treatment, underscoring the importance of

cardiovascular health and vigilance in recognizing uncommon cardiac conditions.