

[PICTURES IN CLINICAL MEDICINE]

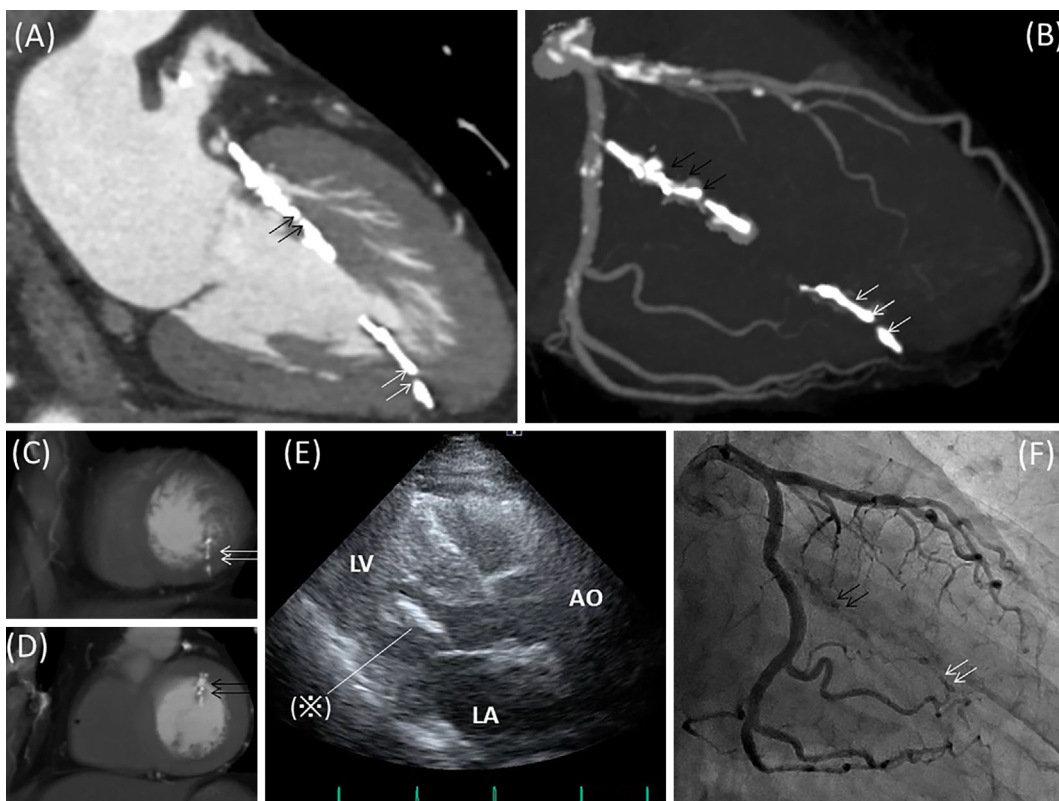
Transmural Calcification Penetrating the Bilateral Papillary Muscles

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Picture.

A 75-year-old man with no history of myocardial infarction was referred to our hospital because of ST-segment depression in precordial electrocardiography. He had neither renal dysfunction nor abnormal calcium homeostasis. Sixty-four-detector computed tomography revealed two transmural calcified fragments (Picture, arrows) penetrating the center of the papillary muscles, extending to the chordae and inserting into the walls of the left ventricle (Picture A-D). Anterolateral calcification was noted in the region of the first obtuse marginal branch (Picture, black arrows). Echocardi-

ogram showed chordal and papillary calcification without mitral insufficiency or annulus calcification (Picture E, *). Coronary angiography showed relatively normal findings except for the calcified fragments in the region of the posteromedial papillary muscle and the total occlusion of the first obtuse marginal branch with calcification (Picture F). The patient was managed medically without further symptoms. These feeding arteries of the papillary muscles are “end arteries”, making the muscle prone to ischemia and thereby potentially inducing the development of such curi-

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ous calcifications.

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