**TRIPLE CHAMBER MYXOMA (BIATRIAL AND RIGHT VENTRICULAR) IN A 17 YEAR OLD MALE**

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A 17 year old male consulted a neurologist due to recurrent episodes of syncope with prodrome of blurring, palpitations and light headedness, usually occurring after exertion. Neurologic examination was unremarkable. Magnetic Resonance Imaging (MRI) of the brain revealed contrast enhancing lesions in the right thalamus and hypothalamus and non-enhancing fairly defined lesions in the left thalamus and left centrum semiovale. The working diagnosis was stroke in the young, further investigation including a referral to a cardiologist was done. Physical examination revealed normal heart rate, regular rhythm, soft S1 and a low frequency diastolic sound of the same intensity heard both at the mitral and tricuspid areas with a grade 3/6 holosystolic murmur at the apex radiating to the axilla. Two dimensional transthoracic echocardiography revealed ectopic densities in the left atrium, right atrium and right ventricle probably a triple chamber myxoma. He was referred to thoracic cardiovascular surgery and was scheduled for triple chamber cardiac myxoma excision. Pre-operative transesophageal echocardiogram confirmed the presence of three masses, with each mass, located in the right atrium, left atrium and right ventricle. Excision of the bilateral atrial tumors and the right ventricular tumor with mitral valve repair were performed. Histopathology confirmed the diagnosis of myxoma in all three specimens. He tolerated the procedure well and was stable postoperatively. Multiple myxoma are present in less than 5% with bi-atrial myxomas occurring in 2.5% of cases. Literature search revealed only one reported case of triple chamber myxoma and 1 case of sporadic myxoma involving all chambers.