

## Mixed Atrial Septal Defect

### Miks Atriyal Septal Defekt

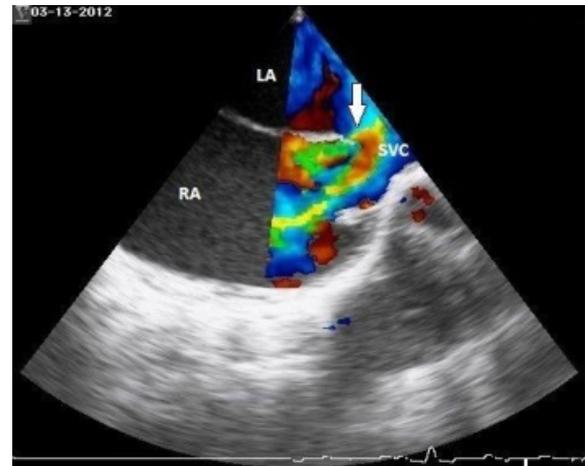
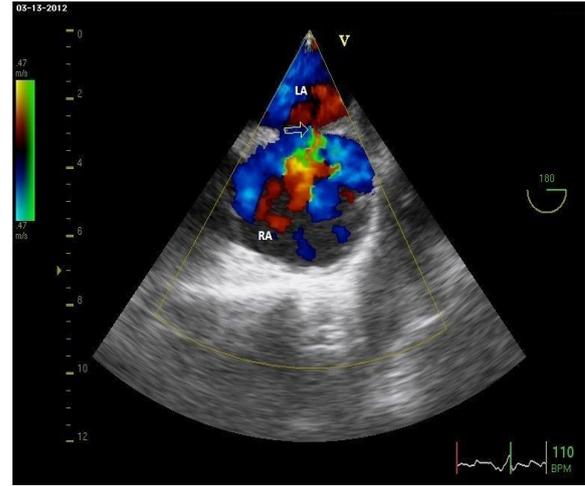
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A 19-year-old woman admitted to our cardiology department with progressive dyspnea on effort and palpitations. Her blood pressure 115/85 mmHg, heart rate 70/min, and respiratory rate 20/min. Cardiac auscultation revealed 2/6 grade systolic ejection murmur at the left upper sternal border. Electrocardiography demonstrated sinus rhythm with incomplete right bundle branch block. Transthoracic echocardiography revealed right atrial and ventricular enlargement and a left-to-right shunt within the atrial septum. In Doppler echocardiography demonstrated moderate tricuspid regurgitation. Pulmonary artery pressure was 38 mmHg and the Qp/Qs ratio was 1.6. Transesophageal echocardiography showed an ostium secundum defect, 5 mm in diameter (Figure 1, arrow), and a sinus venous defect, 15 mm in diameter (Figure 2, arrow).

The patient was referred for surgical repair but the patient refused the operation. Atrial septal defect is one of the common types of congenital heart disease. Mixed defects account for only 7% of all atrial septal defects. The normal interatrial septum can be anatomically divided into 5 septal zones. Any defect involving 2 or more of the atrial septal zones is termed a mixed atrial septal defect.



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