**A TALE OF TWO OUTCOMES: PSEUDOANEURYSM OF THE MITRAL-AORTIC INTERVALVULAR FIBROSA; A RARE AND DANGEROUS CONDITION**

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The mitral-aortic intervalvular fibrosa is a relatively avascular structure which lies between the anterior leaflet of the mitral valve and left coronary or noncoronary aortic cusp, alongside the left ventricular outflow tract. Pseudoaneursym of this structure is a rare and potentially fatal abnormality. Although some patients with this abnormality are asymptomatic, more commonly it is associated with infection, or injury related to aortic valve surgery. Other associations include congenital disease, inflammatory conditions, or procedure based trauma.

Review of literature identifies two comprehensive review articles detailing reports of pseudoaneursym of the mitral-aortic intervalvular fibrosa (P-MAIVF). In the first by Sudhakar S et al, published in 2010 by the American Society of Echocardiography, 88 cases were identified in English-language articles published from 1966-December 2009. The second by Sahan E et al, published in 2015 by Herz, identified a total of 166 cases in articles published from 1960-March 2014. Since March 2014, three additional cases have been discussed in the available English-language reports per our review. We report an additional two cases. Though primary investigation is generally with transthoracic echocardiography, transesophageal echocardiography is more diagnostically specific. Cardiac computed tomography and magnetic resonance imaging can be further helpful in surgical evaluation. Rupture of the pseudoaneurysm into the pericardium may be fatal and hence when pseudoaneurysm is diagnosed, surgical treatment should be recommended to all patients even if they are asymptomatic. Several complications may arise in patients with P-MAIVF which may include rupture, fistula formation, compression, thrombosis, infection, and heart failure. In conclusion, further studies are required in order to earlier identify and effectively treat patients with P-MAIVF. For now, we encourage physicians to be watchful for P-MAIVF and its complications in those patients with higher risk such as those with infection (endocarditis), and trauma related to aortic valve surgery.