

## Not just a straightforward transient ischaemic attack

A 71-year-old woman presented with an episode of sudden loss of power in her left hand and tingling in her left arm and left leg from her knee down to her foot, which had lasted for 1 hour, 2 days previously. She reported one other episode 3 weeks before this where her left leg from the knee down ‘felt like jelly’, which also spontaneously resolved. Past medical history included hypertension, hypothyroidism and osteoporosis. Clinical examination was normal with no focal neurological deficit, murmurs or carotid bruits. Bloods, computed tomography of the brain and carotid Doppler were all normal. She was treated as presumed to have had a transient ischaemic attack. However, an echocardiogram revealed a large left atrial myxoma (4.9 cm<sup>2</sup>) with a stalk attached to the inter-atrial septum (Figure 1). This was resected and histology confirmed that this was a myxoma.

### Author details

<sup>1</sup>Department of Acute Medicine, Galway University Hospital, Galway, Ireland

<sup>2</sup>Department of Cardiology, Galway University Hospital, Galway, Ireland

Ciara De Buitléir<sup>1</sup>

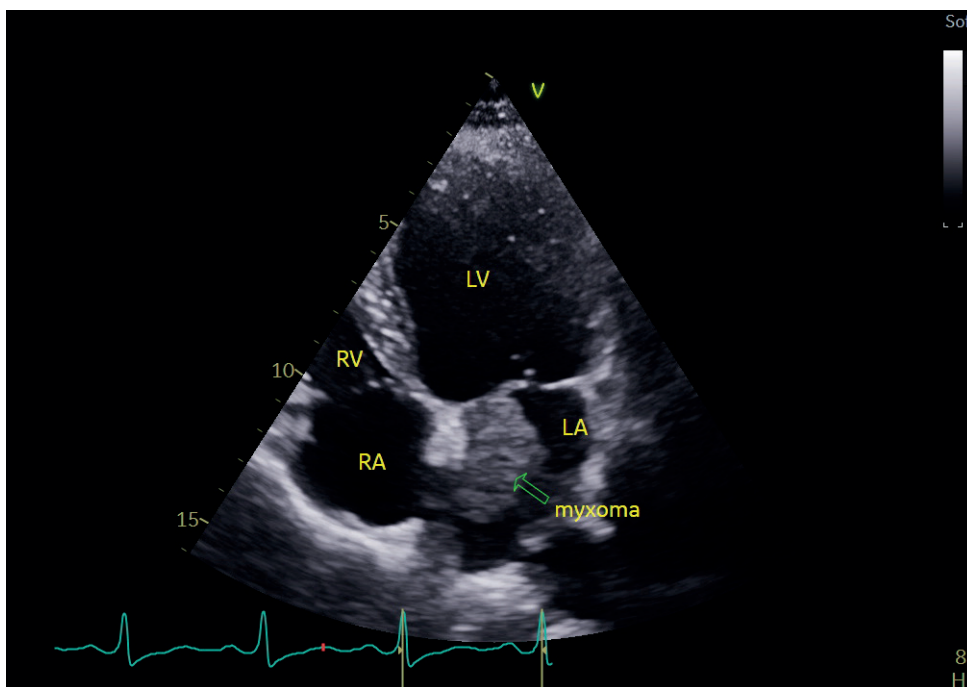
Bryan Renton<sup>1</sup>

Paul Nolan<sup>2</sup>

Author details can be found at the end of this article

**Correspondence to:**

Bryan Renton;  
bryan.renton@hse.ie



**Figure 1.** Transthoracic echocardiogram demonstrating a large left atrial myxoma. LA = left atrium; LV = left ventricle; RA = right atrium; RV = right ventricle.

### How to cite this article:

De Buitléir C, Renton B, Nolan P. Not just a straightforward transient ischaemic attack. *Br J Hosp Med.* 2022. <https://doi.org/10.12968/hmed.2021.0501>