

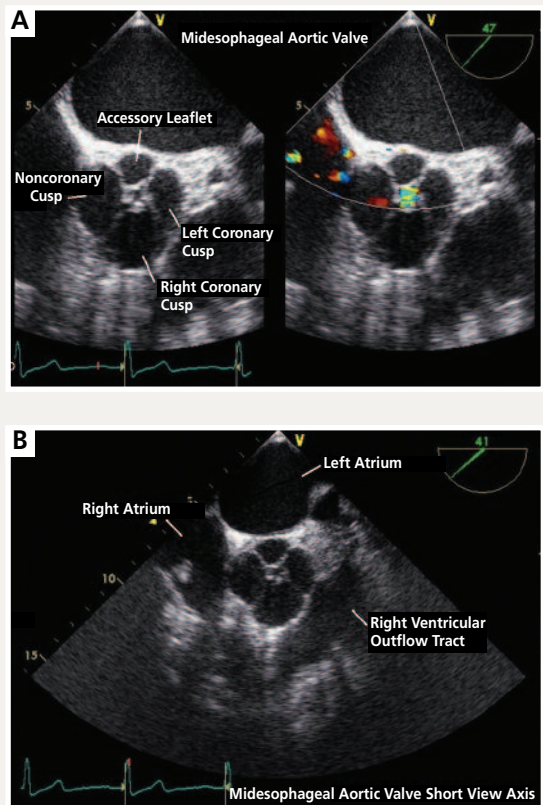
Quadricuspid Aortic Valve With Aortic Regurgitation

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A 51-year-old man presented to the hospital with symptoms suggestive of an embolic stroke, including slurred speech. The patient's history included mild aortic regurgitation, which was detected by means of transthoracic echocardiography 3 months before presentation. Transesophageal echocardiographic findings confirmed mild aortic regurgitation (panel A) and revealed a quadricuspid aortic valve (QAV). A QAV is a rare cardiac anomaly that is often found incidentally during echocardiography, surgical procedures, or postmortem examinations.¹ Since 1862, more than 200 cases and 8 variations of QAV have been described, with an incidence of 0.008% to 1.0% among US adults.²⁻⁴ Our patient had a type B QAV, with 3 equal-sized cusps and 1 smaller cusp (panel B). The patient was instructed to take aspirin (325 mg daily) for the presumed stroke. His symptoms resolved within 24 hours and he remained asymptomatic at 2-week follow-up. The patient was instructed to undergo transthoracic echocardiography annually to monitor progression of his aortic regurgitation.

References

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