

## Images in clinical medicine



# P3 mitral valve prolapse in a young patient, an uncommon case

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**Received:** 07 Jul 2022 - **Accepted:** 07 Aug 2022 - **Published:** 11 Aug 2022

**Keywords:** Mitral valve prolapse, P3, mitral regurgitation

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**Cite this article:** Nabil Laktib et al. P3 mitral valve prolapse in a young patient, an uncommon case. PAMJ Clinical Medicine. 2022;9(33). 10.11604/pamj-cm.2022.9.33.36252

**Available online at:** <https://www.clinical-medicine.panafrican-med-journal.com//content/article/9/33/full>

## P3 mitral valve prolapse in a young patient, an uncommon case

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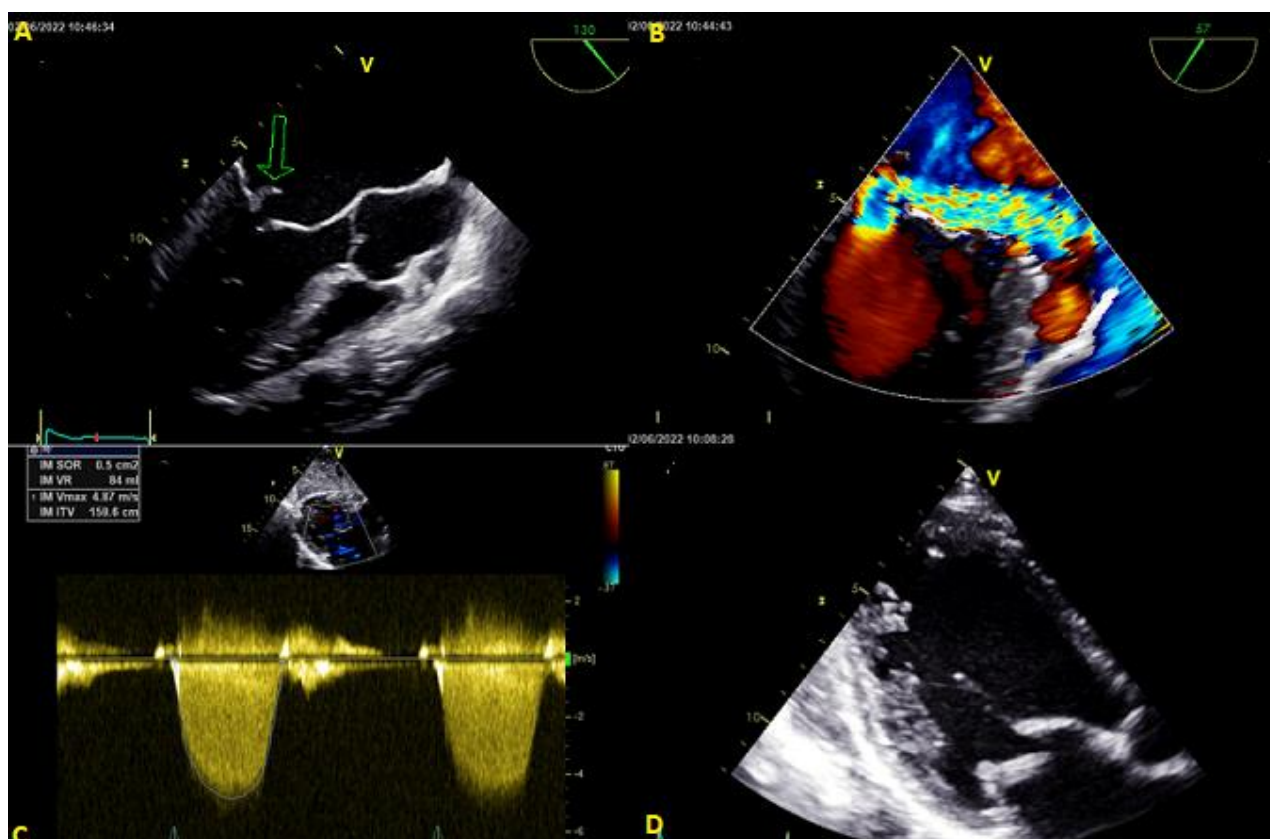
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## Image in medicine

A 33-year-old patient with no cardiovascular risk factors and no history presented with shortness of breath, palpitations and fatigue. The cardiovascular examination showed an apex beat lateral and inferior displacement and a mitral systolic murmur. The electrocardiogram showed both left ventricular hypertrophy and left atrial hypertrophy. Inflammatory markers were within normal range and blood cultures were sterile. Transthoracic echocardiography showed a severe mitral regurgitation and posterior mitral leaflet prolapse and both left ventricular and auricular dilatation. The transoesophageal echocardiography showed a P3 prolapse with a mobile structure on the posterior mitral valve atrial side suggesting a chordal rupture. The patient had a surgical cure (posterior valve plasty) with good outcomes.



**Figure 1:** (A) transoesophageal echocardiography showing a P3 mitral valve prolapse; (B) mitral regurgitation color doppler flow; (C) continuous wave doppler through the mitral valve showing a severe mitral regurgitation effective regurgitation orifice:  $50\text{mm}^2$  regurgitation volume: 84ml; (D) transthoracic echocardiography apical three chambers view showing the mitral prolapse