A 62-year-old man presented with a 2-month history of progressive dysphagia and weight loss. Esophagogastroduodenoscopy revealed a tumor in the cardia, and a biopsy showed adenocarcinoma. He had a history of recurrent embolic cerebrovascular accidents 3 years ago and underwent warfarin therapy after these events. He was referred for locoregional staging of cardia tumor by endoscopic ultrasound (EUS). The cardia tumor stage was T3N1. During EUS, we found a hyperechoic moving mass lesion attached to the left atrium wall. The patient underwent transthoracic echocardiography and surgery. The cardiac tumor was myxoma of the left atrium.

Endoscopy_UCTN_Code_CCL_1AB_2AC_3AB

Competing interests
None

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DOI https://doi.org/10.1055/a-0896-2657
Published online: 9.5.2019
Endoscopy 2019; 51: E269
© Georg Thieme Verlag KG
Stuttgart · New York
ISSN 0013-726X

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