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.

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Competing interests

None

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