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Fibroelastoma to Atrial Flutter: A Patient Journey

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Abstract

It began in 2020 with what seemed to be a swallowing problem. This was combined with a very dry cough usually occurring in the morning. When we began to suspect the possibility of a problem more serious than perhaps an allergy related cough, we made an appointment in March 2021 with our primary care physician. After his examination he suggested an appointment with a gastroenterologist. At this appointment, many other tests were ordered, including the dreadful esophagogram. To our surprise, our gastroenterologist referred me to a cardiologist.

After research, I consulted with Dr. James Lee of Associates in Cardiology in the Washington DC area. He immediately ordered an EKG and an Echocardiogram. In the middle of the echocardiogram, the nurse administering the test said there was something she wanted to check with Dr. Lee and left the room. During our follow-on consultation, Dr. Lee suggested a Nuclear Cardiac MRI, which, at the time, was a fairly new technology allowing the doctor to actually view the interior of the heart. The MRI showed what the standard cardiac imaging tests would not show: a fibroelastoma. This is a rare tumor inside the heart. Following the catheterization on June 23, 2021, Dr. Ammar S. Bafi at the Washington Hospital Center successfully removed the tumor by an open-heart surgery.

During the intervening years, I've been under the care of an oncologist, pulmonologist, and nephrologist. During a routine semi-annual appointment, Dr. Lee suggested that I should see a cardiac surgeon, Dr. Scott Shapiro. My tests showed an irregular heartbeat resulting from Atrial Flutter. My presentation will be the story from a swallowing problem in 2021 which, step by step, led to an Atrial Flutter surgery in 2026, based on the hypothesis that preventive care by cardiologists most likely kept me from having a life-threatening stroke.