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A 43-year-old woman presented with dyspnoea and chest discomfort. She was a current smoker and had been on antihypertensive medications for 2 years.

Resting ECG showed complete atrioventricular block with right bundle branch block pattern. Transthoracic echocardiography showed a membranous interventricular septal aneurysm without any shunt flow (panel A, parasternal long axis view; panel B, apical long axis view). Left ventricular systolic function was normal. Cardiac computed tomography (panel C) and left ventriculography (panel D) confirmed the echocardiographic findings. The ECG, which was obtained 12 years ago, showed neither atrioventricular block nor right bundle branch block. As she had no history of endocarditis, myocardial infarction, or surgical procedure, we speculated that the aneurysm was congenital in origin. A DDD pacemaker was implanted and she was discharged without significant complications.

Interventricular septal aneurysm without ventricular septal defect is very rare and often accompanies conduction disturbances. It has been reported that the aneurysm compresses the His bundle and results in distortion and fibrosis in this region.

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