A Vanishing Cardiac Mass

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Primary cardiac lymphoma is defined as a non-Hodgkin lymphoma involving only the heart and/or pericardium and is a rare malignancy.1 Patients may present with signs of heart failure, cardiac tamponade, or arrhythmias, depending on the site of the tumor.2 Prognosis is poor due to diagnostic delay and relevance of the site of disease.

Case: “A 55-year-old man presented with a 2 month history of exertional chest pain, dyspnea, and recurrent fever. One month prior he also had evidence of a myocardial infarction with ST elevations and positive troponins. At time of admission his vital signs were stable. Transesophageal echocardiography was performed due to suspicion of bacterial endocarditis and showed huge bilateral atrial enlargement and a nonhomogeneous mass that distorted the atrial architecture. The mass externally compressed the superior and inferior vena cava and aortic arch, and infiltrated the right atria and pericardial space (Figure 1).” Endopericardial biopsy showed a subxiphoid approach confirmed large B-cell lymphoma. He was treated with external beam radiation (40 Gy) and CHOP chemotherapy (cyclophosphamide, doxorubicin, vincristine, and prednisone). Follow-up transesophageal echocardiography at 8 months showed no evidence of tumor (Figure 2).

REFERENCES
