

Cardiac tumors: from echo to surgery

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Introduction: Primary cardiac tumors are extremely rare. The incidence is less than 0.1 percent. Benign myxomas are the most common tumors and they account for 27% of primary cardiac tumors. Other benign tumors include papillary fibroelastomas, hemangiomas and mesotheliomas. Malignant primary cardiac tumors are rare. In adult, angiosarcomas, rhabdomyosarcomas, mesotheliomas and fibrosarcomas are seen. Metastatic involvement of the heart is over 20 times more common. Nonprimary cardiac tumors can include: lung and breast cancer, lymphoma, melanoma. Echocardiography is widely available and provides a simple, non-invasive technique for the initial evaluation. The major treatment is prompt surgical resection because of the risk of embolisation or other cardiovascular complications.¹⁻³

Case report 1: MYXOMA: 62-years-old female patient with cardiac mass in left atrium, echo characteristic of myxoma with three episodes of cerebrovascular event prior to echocardiography diagnostic (**Figure 1**).

Case report 2: LYMPHOMA: 69-years-old male patient with primary malignant cardiac tumor: diffuse large B cell lymphoma that invaded pericardium, left and right atrium, interatrial septum and left ventricle. The diagnose was made by biopsy and afterwards chemotherapy was performed with successful results (**Figure 2**).

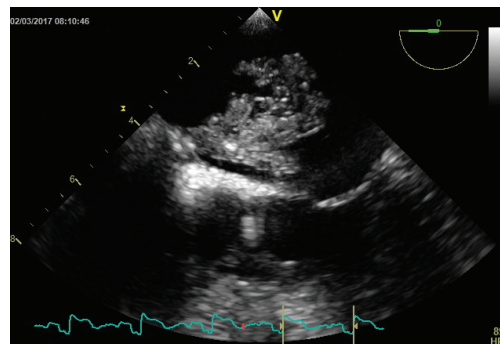


FIGURE 1. Traneseofageal image of myxoma in left atrium.

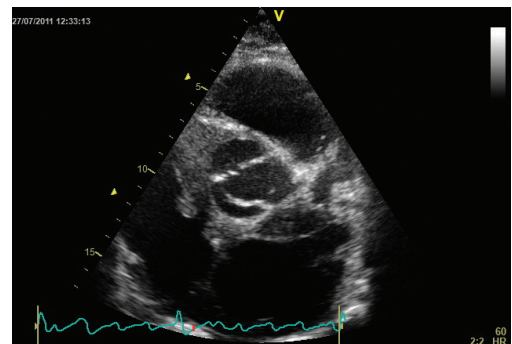


FIGURE 2. Parasternal short axis view in the aortic valve level of lymphoma of the heart: tumor is surrounding the aorta.

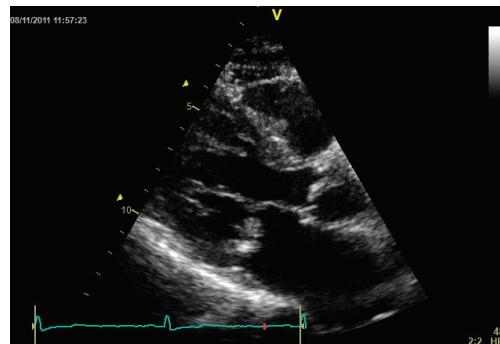


FIGURE 3. Long axis parasternal view of the solid tumor on the posterior mitral valve leaflet.

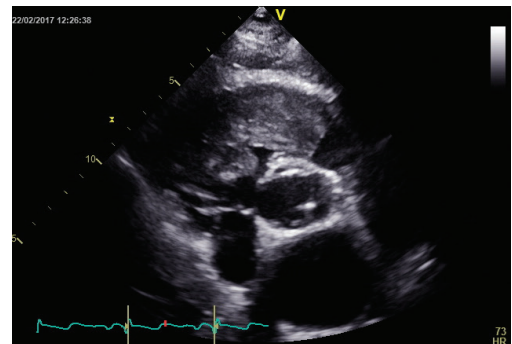


FIGURE 4. Parasternal short axis view in the aortic valve level of the right ventricle mass with obstruction of the right ventricular outflow tract.

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