Surgical Case Reports and Reviews

Case Report ISSN: 2516-1806

Cardiac lymphoma involving the right heart

Dror B Leviner, Eitan Snir, Dan Aravotand Milton Saute*

Department of Cardiothoracic Surgery, Rabin Medical Center, Beilinson Campus, Israel

Case study

A 63-year-old woman with a medical history of smoking and epilepsy was hospitalized after a two-week period of shortness of breath. Her physical examination was notable for tachycardia and distant heart sounds. She underwent a transesophageal echocardiogram which showed a large mass engulfing the right ventricle and atrium, infiltrating the free wall of the ventricle into the tricuspid valve and compressing the superior vena cave (Figure 1). A chest CT revealed a large mass infiltrating the right ventricle and atrium and intruding the SVC (Figure 2). She was hemodynamically stable. A multidisciplinary team decided that a biopsy was necessary. The post-operative course was uneventful. The biopsy specimen showed a diffuse large B-cell lymphoma (Figure 3). Chemotherapy was immediately started.

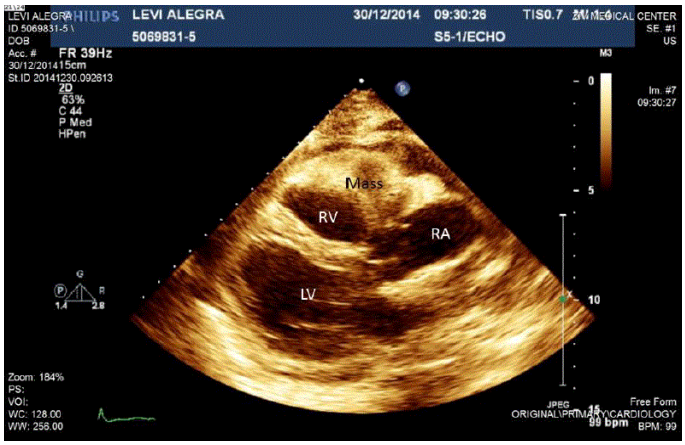

Figure 1. Transesophageal echocardiogram - Parasternal long axis view with the mass attached to the RV and RA

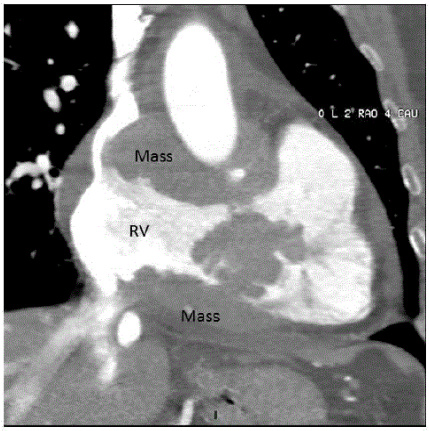

Figure 2. ECG gated contrast enhanced CT - coronal reconstruction demonstrating the mass engulfing the RVOT and the aortic root

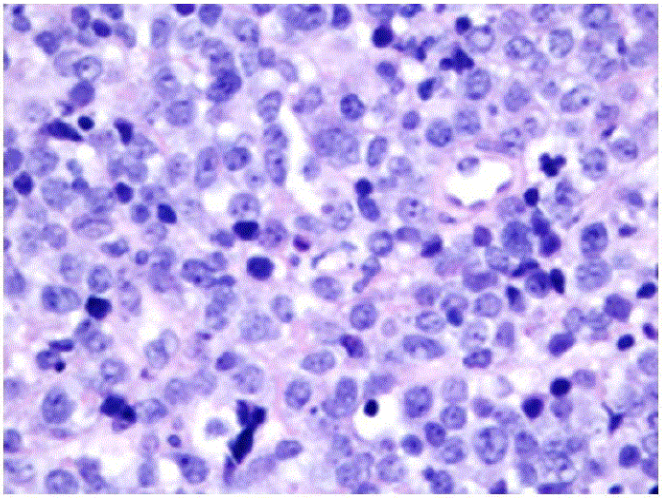

Figure 3. H&E staining (X40) showing diffuse sheets of lymphoma cells

Primary cardiac lymphomas comprise only 1% of all primary cardiac tumors, which are rarer than metastatic tumors of the heart [1]. B-cell lymphoma is the most common type, typically involving the right cardiac chambers. Presentation usually includes signs of obstruction or emboli. Treatment is based on chemotherapy and radiotherapy, with better prognosis than that of other cardiac malignancies [2].

References

1. Reynen K (1996) Frequency of primary tumors of the heart. *Am J Cardiol* 77: 107. [Crossref]
2. Nascimento AF, Winters GL, Pinkus GS (2007) Primary cardiac lymphoma: clinical, histologic, immunophenotypic, and genotypic features of 5 cases of a rare disorder. *Am J Surg Pathol* 31: 1344-1350. [Crossref]

Correspondence to: Milton Saute, Department of Cardiothoracic Surgery, Rabin Medical Center, Beilinson Campus, Petach Tiqva 49100, Israel, Tel: +972-3-9376701; E-mail: sautem@clalit.org.il

Key words: *Cardiac Tumors, Echocardiography*

Received: June 01, 2019; **Accepted:** June 10, 2019; **Published:** June 13, 2019