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Case Report

Cardiocentro Ernesto Che Guevara Santa Clara Cuba

Right ventricular myxoma: an unusual location

Mixoma en ventrículo derecho: una localización inusual

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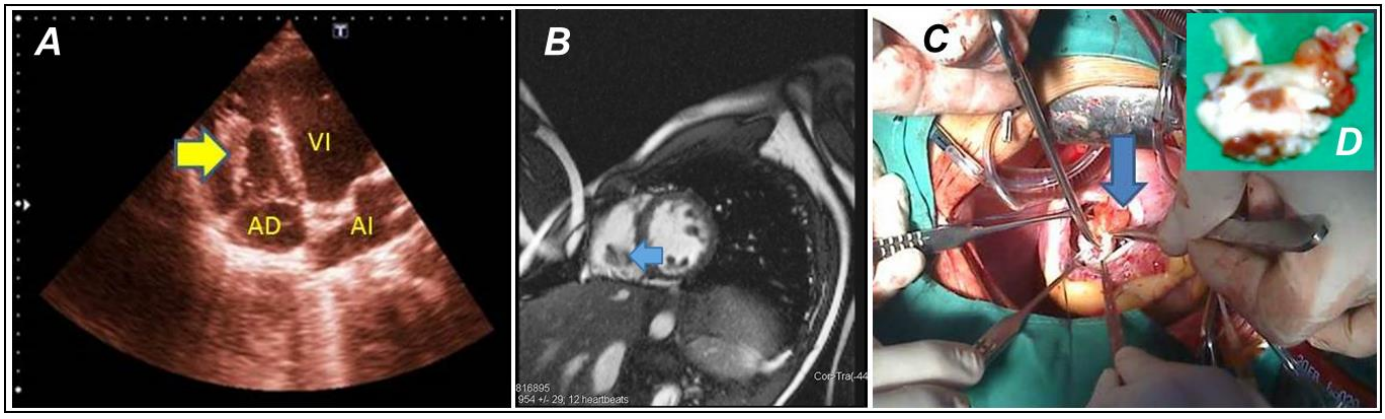

Primary cardiac tumors are rare, with a more or less known epidemiological pattern, although not a specific symptomatology. They can be clinically characterized by signs of cardiomyopathy, pericardial involvement, systemic or pulmonary thromboembolism, valve and intracavitary obstruction and rhythm disorders.

Cardiac myxomas are usually solitary and 75% of cases develop in the left atrium and 15-20% in the right atrium, usually attached by a pedicle to the interatrial septum, very close to the margins of the foramen ovale. They may appear in a 2.5 to 4% in the left ventricle and between 4-9% in the right. It may occasionally settle on the valvular apparatus. In 7% of

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cases it develops as a family disease associated with multiple endocrine neoplasias, lentiginosis and constitutional symptoms such as fever and weight loss (Carney complex).

In this paper we present the images of a myxoma located in the right ventricle (RV). The transthoracic echocardiogram (Panel A) and nuclear magnetic resonance (Panel B) show the image compatible with the tumor (arrows). Both images are complemented by a photo of surgery (Panel C) and the removed anatomical parts (Panel D). This case is very interesting because of the myxoma location in the right ventricle, the young age of the patient, a 14 year old male (this tumor is most common between the third and sixth decades of life, and in female patients), and the presence of an unusual anatomy with multiple pedicle formations. Histological examination confirmed the diagnosis. The patient remains on outpatient follow-up in our center and to date, after more than six months after the surgery, he continues with a favorable outcome.