Images in Thoracic and Cardiovascular Surgery

# A rare cardiac tumor incidentally discovered

## Un tumor cardíaco diagnosticado incidentalmente

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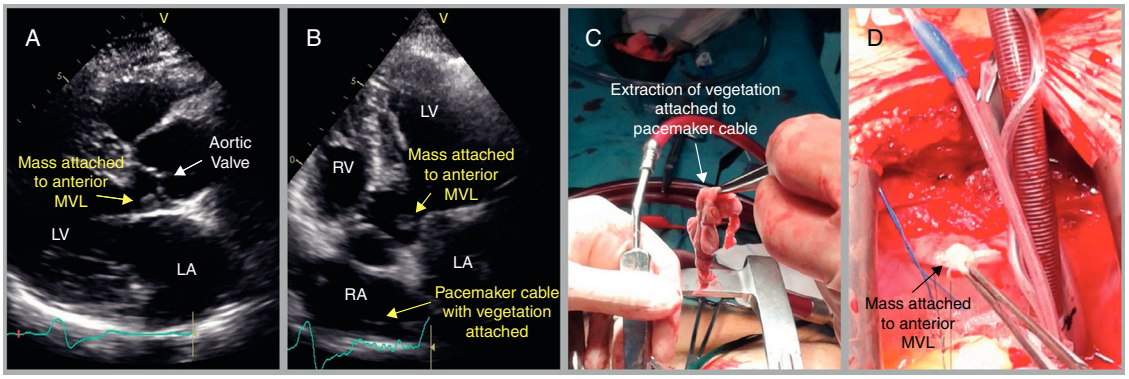


**Figure 1.** (A,B) 2D echocardiographic (C,D) large vegetation attached to pacemaker cable.

We report the case of a 61-year-old man admitted with persistent fever lasting two weeks. He had a pacemaker since 2006 due to a complete atrioventricular block. His physical examination was unremarkable, with the exception of the presence of fever. Analytical evaluation revealed a mild elevation of protein-C-reactive.

2D echocardiographic assessment revealed a mass attached to anterior mitral valve leaflet (Fig. 1A and B, Video 1), already documented but not investigated several years ago. The exam also revealed a large vegetation attached to pacemaker cable, without tricuspid valve involvement (Fig. 1B, Video 2). Blood cultures identified a *Staphylococcus epidermidis* and antibiotics were administered during the preconized time.[1] The patient was submitted to the surgical extraction of pacemaker cables with the vegetation and removal of the mitral mass (Fig. 1C and D). Another pacemaker was implanted after several weeks.

The pathological exam of the mitral valve mass revealed a haemangioma. This has a prevalence of 1–5% of all benign cardiac tumors.[2] Its clinical presentation varies, depending on the location and size.[2] The prognosis is unpredictable, since there is the risk of recurrence.[2] This case reports an incidental discover of a rare cardiac tumor during the diagnosis of another cardiac mass.

## Ethical disclosures

**Protection of human and animal subjects.** The authors declare that the procedures followed were in accordance with the regulations of the responsible Clinical Research Ethics Committee and in accordance with those of the World Medical Association and the Helsinki Declaration.

**Confidentiality of data.** The authors declare that they have followed the protocols of their work centre on the publication of patient data.

**Right to privacy and informed consent.** The authors must have obtained the informed consent of the patients and/or subjects mentioned in the article. The author for correspondence must be in possession of this document.

## Appendix A. Supplementary data

Supplementary data associated with this article can be found, in the online version, at doi:10.1016/j.circv.2016.06.005.

## References

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