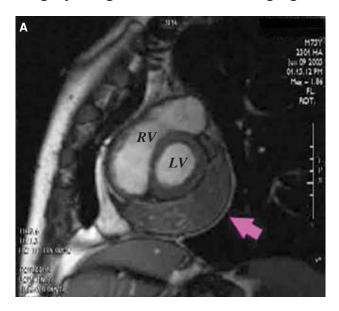
Cardiac tamponade caused by intrapericardial organized hematoma as a late complication of open heart surgery: magnetic resonance imaging



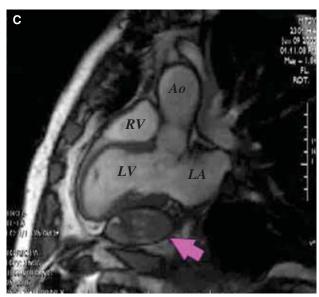
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Maltepe University, Faculty of Medicine, Department of Cardiology, Istanbul, Turkey A 59-year-old man who underwent a triple coronary bypass operation nine years ago presented with complaints of dyspnea and malaise. The patient's effort capacity has been continuously worsening in the past year

due to the dyspnea, and was reported to experience severe dyspnea even on mild exertion, especially in the past month. Improvement was reported following administration of diuretics at the previous health centers where the patient was evaluated; but has however reported recent increases in his complaints. Physical examination revealed a blood pressure of 100/60 mmHg, heart rate of 120 beats/min, which was rhythmic. Heart sounds were normal. Examination revealed bilateral fine crepitant basilar rales. In addition, transthoracic echocardiography revealed normal ventricular functions. A suspicious mass was identified in the parasternal long axis section, exerting compression adjacent to the posterior wall of the left ventricle, and preventing ventricular filling (the findings were considered nonspecific and were not registered). The cardiac magnetic resonance imaging revealed an intrapericardial mass which was found to compress and partially surround the left ventricle (Figure A-C). No relationship was found with the heart chambers and extracardiac structures. The mass was successfully removed by surgical operation. Histopathological analysis revealed that the mass was an organized

Açık kalp ameliyatı sonrası geç dönemde ortaya çıkan intraperikardiyal organize hematomve kalp tamponadı: Manyetik rezonans görüntüleme





hematoma. An organized hematoma is a late complication of open heart surgery, which exerts compression on the heart chambers. Although the mass in our patient was identified by transthoracic echocardiography, its relationship with the other structures was not adequately evaluated. On the other hand, the cardiac magnetic resonance imaging revealed a detailed demonstration of the relationship of the mass with other structures and the heart chambers.

Figures. (A-C) Magnetic resonance imaging of the intrapericardial mass with regular margins compressing and partially surrounding the left ventricle. LV: Left ventricle; RV: Right ventricle; LA: Left atrium; Ao: Aorta.