



IMAGES IN INTENSIVE MEDICINE

Cytoreductive surgery for cardiac sarcoma

Cirugía citorreductora en el sarcoma cardiaco

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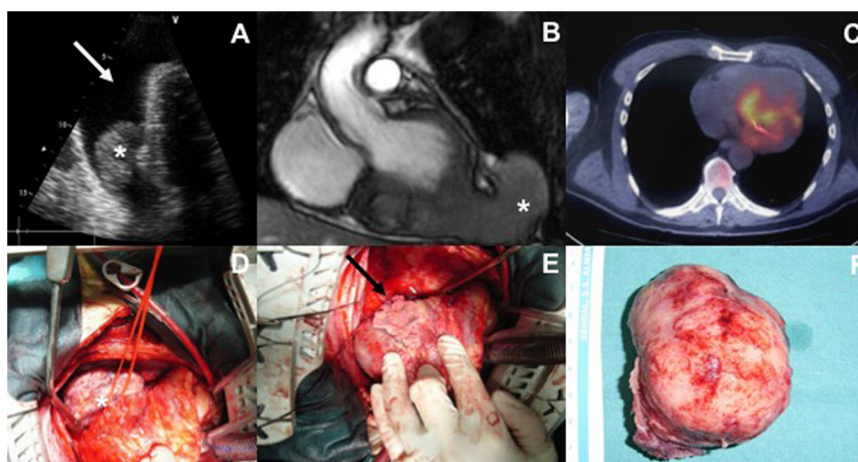


Figure 1

A 59-year-old male was referred to our center due to cardiac tamponade (Fig. 1A, arrow), and pericardiocentesis was performed. Echocardiography revealed a mass in the posteroinferior region of the left ventricle (LV) ($3.3 \times 7.1 \times 3$ cm) (Fig. 1A, asterisk), which was confirmed by CT (Fig. 1B, asterisk). The PET scan showed no tumor spread (Fig. 1C). At surgery, a large (8 cm) pediculate (25 mm) encapsulated tumor was observed, infiltrating the diaphragmatic wall of the LV (Fig. 1D, asterisk). Complete resection was performed, with pericardial patch reconstruction of the wall (Fig. 1F, arrow E). The pathology report indicated a sarcomatoid pericardial mesothelioma. Sarcomas are the most common primary cardiac malignancies. Complete resection is essential to reduce obstructive symptoms and improve curative intent, increase patient life expectancy and reduce recurrence with the administration of adjuvant therapy.

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Declaration of Generative AI and AI-assisted technologies in the writing process

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Declaration of competing interest

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