

## CASE REPORT

### Obstructive Right Atrial Lipoma

**Salih Şahinkuş<sup>1</sup>, Harun Kılıç<sup>1</sup>, Selçuk Yaylacı<sup>2</sup>, Yusuf Can<sup>1</sup>, Ramazan Akdemir<sup>1</sup>**

<sup>1</sup>Department Of Cardiology, Sakarya University Training and Research Hospital, Sakarya, Turkey

<sup>1</sup>Department Of Internal Medicine, Sakarya University Training and Research Hospital, Sakarya, Turkey

Corresponding Author: Salih Sahinkus

Sakarya Training and Research Hospital, Department Of Cardiology. Adnan Menderes St. Sağlık Sok. No: 195 Adapazarı Sakarya, Turkey.

Mail: slshsnks@gmail.com

Tel: 05064713599

#### ORCID

Salih Şahinkuş, <https://orcid.org/0000-0001-8988-5527>

Harun Kılıç, <https://orcid.org/0000-0002-1358-5015>

Selçuk Yaylacı, <https://orcid.org/0000-0002-6768-7973>

Yusuf Can, <https://orcid.org/0000-0003-3686-983X>

Ramazan Akdemir <https://orcid.org/0000-0002-2262-3087>

Geliş Tarihi / Received: 11.02.2019      Kabul Tarihi / Accepted: 27.03.2019

**Abstract:** Primary benign cardiac tumors are very rare and only 8.4% of them are cardiac lipomas. We report a case of a 67-year-old female patient who diagnosed with right atrial free wall lipoma on echocardiography and tomography. The patient underwent cardiovascular surgery unit for tumor resection.

**Introduction:** Primary cardiac tumors are rare and 75% of them are benign. Only 8.4% of all primary cardiac benign tumors represent as a cardiac lipoma (1). They can occur in a wide age group and incidence is equal in both genders. Usually, they are asymptomatic but also they can manifest with dyspnea, arrhythmias and embolism due to the location of the tumor in the cardiac cavity. 50% of the cardiac lipomas origin from subendocardial, 25% are intramyocardial and 25% are epicardial (2). The right atrium and left ventricle are mostly founding locations of cardiac lipomas (3).

**Case Report:** A 67-year-old female patient presented with worsening dyspnea with a 1-year history. Her past medical history included essential hypertension only. There were no significant findings in physical examination and electrocardiography. Transthoracic echocardiography (TTE) showed a 52x31mm intracavitary homogenous mass located in the free right atrial wall that closes the orifice of the superior vena cavae (Figure.1). Then cardiac computed tomography (CCT) was scanned for strengthening the diagnosis (Figure.2). After the non-invasive investigation, cardiac lipoma was the diagnosis firstly. The patient redirected to the cardiovascular surgery unit.

**Discussion:** Lipomas of the heart are benign tumors that usually asymptomatic and their diagnosis is often incidental on TTE, CCT or cardiac magnetic resonance (4). The right atrium and left ventricle are the most frequent intracardiac locations (5). In symptomatic patients surgical approach is justified, however treatment in asymptomatic patients is a dilemma and there are no randomized clinical trials to guide the disease and treatment (6).

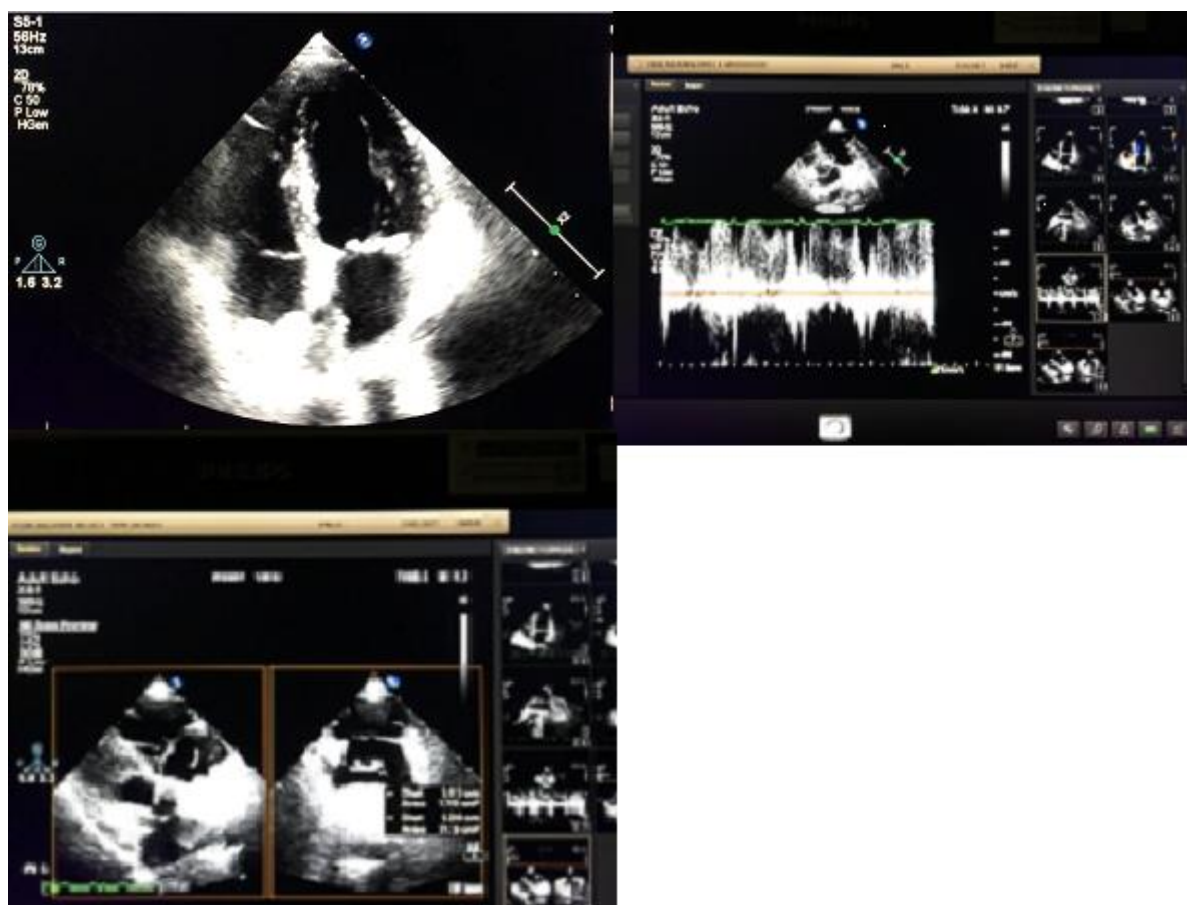


Figure 1.

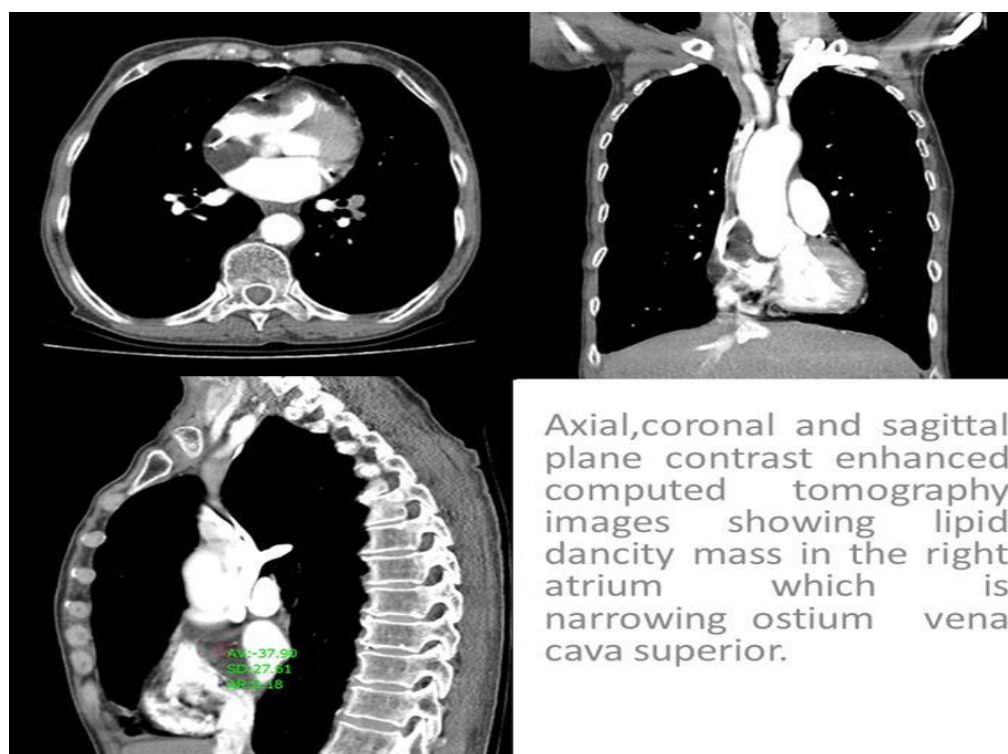


Figure 2.

#### References:

1. Li D, Wang W, Zhu Z et al. Cardiac lipoma in the interventricular septum: a case report. *Journal of Cardiothoracic Surgery*. 2015; 10:69
2. Habertheuer A, Andreas M, Wiedeman D et al. A rare case of obstructive right atrial lipoma. *Ann R Coll Surg Engl*. 2014;96:e39-e41
3. D'Souza J, Shah R, Abbass A, et al. Invasive Cardiac Lipoma: a case report and review of literature. *BMC Cardiovascular Disorders*. 2017; 17:28
4. Singh S, Singh M, Kovacs D, et al. A rare case of a intracardiac lipoma. *International journal of surgery case reports*. 2015;9:105-108
5. Sivrioglu AK, Ozturk E, Geceer G, et al. Incidental right atrial lipoma: Appearance on multidetector computed tomography imaging. *Hellenic J Cardiol*. 2014;55:422-423
6. Monti L, Scardino C, Nardi B, et al. Lipoma of the interventricular septum. *EurheartJ* 2015;10:1093