## Primary right atrial subendocardial lipoma

## Primer sağ atriyal subendokardiyal lipom

A 29-year-old male was referred to our department with transthoracic echocardiography findings of an intracardiac homogenous tumoral mass in the right atrium with a diameter of  $5.3 \times 3.9$  cm without any other pathology. This tumor was adhered to the lateral wall of the right atrium and had little mobility towards the orifice of the vena cava inferior.

Thoracic and abdominal magnetic resonance imaging was performed and confirmed the diagnosis with characteristics of adipose tissue, suggestive of a primary cardiac tumor, lipoma.

The decision of excision of the cardiac tumor was based on the large size of the tumor and symptoms. The operation was performed through a median sternotomy with total cardiopulmonary bypass. The right atrium was entered and a yellow smooth surfaced fatty mass was observed attached to the lateral wall of the right atrium near the orifice of the vena cava inferior (Fig. 1A). The tumor was easily excised totally from atrial wall with blunt dissection (Fig. 1B). The right atrial wall segment where the tumor was thought to arise from was partially excised and the remaining defect was primarily sutured.

On macroscopic examination an encapsulated yellow nodular tumor was observed. On the surface, a small area consistent with muscle tissue was noted. Histopathological examination revealed a circumscribed mass of mature adipocytes (Fig. 2). At the attachment site, entrapped cardiac myocytes were observed. With these findings and according to the anatomical excision site the tumor was defined as right atrial subendocardial lipoma.

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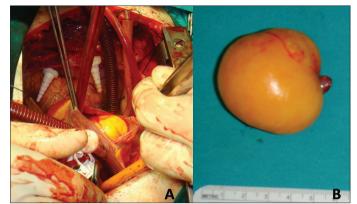


Figure 1. (A) Tumor in the right atrium. (B) Appearance of the tumor after excision

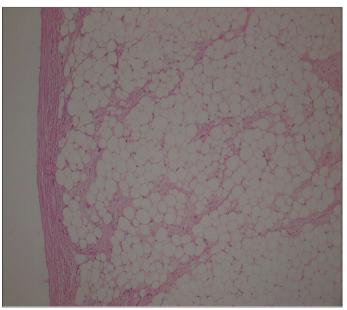


Figure 2. Encapsulated tumor composed of mature adipocytes (hematoxylin & eosin).