

Unusual clinical presentation of isolated cardiac hydatid cyst

İzole kardiyak kist hidatikte farklı klinik belirti

Öner Gülcan, Rıza Türköz, Levent Oğuzkurt, Fahri Tercan**, Alpay Sezgin***

Departments of Cardiovascular Surgery, *Radiology and **Cardiology, Medical Faculty, Başkent University, Adana, Turkey

Cardiac hydatid disease without other organ involvement is a very rare disorder. Clinical presentation of cardiac echinococcosis includes chest pain, palpitation, syncope and dyspnea. We present a case of isolated cardiac hydatid cyst presenting with cough and chest pain.

A 37-year-old male butcher patient was admitted to the hospital with chest pain and productive cough. The patient electrocardiography was imitating inferior myocardial infarction signs (T-wave (-), and pathologic Q on derivations D2-3, aVF). Laboratory tests were normal except C-reactive protein (++) and high sedimentation ratio (100mm/h). The patient was evaluated for his chest pain and underwent coronary angiography, which was normal. Computerized tomography of the thorax confirmed the diagnosis of cystic lesion with normal lung parenchyma (Fig. 1). On cardiac magnetic resonance imaging, the lesion appeared to be

hypointensive on T1 weighted and hyperintensive on T2 weighted images confirming the cystic nature of the lesion (Fig. 2). The patient underwent surgery with cardiopulmonary bypass for cystic cardiac lesion. The lateral free wall cyst close to the phrenic nerve was treated with aspiration after cystotomy, followed by hypertonic saline irrigation. The cyst space was plicated and the cardiopulmonary bypass was terminated. The patient was discharged on the fifth postoperative day without any complication.

Cough is an unusual symptom for isolated cardiac hydatid cyst and we would suggest that it was caused by phrenic nerve irritation as the symptom improved upon removal of the cystic mass causing pressure on phrenic nerve.

In conclusion, in endemic countries, the probability of echinococcosis infection and isolated cardiac involvement's variable symptomatology should be kept in mind.

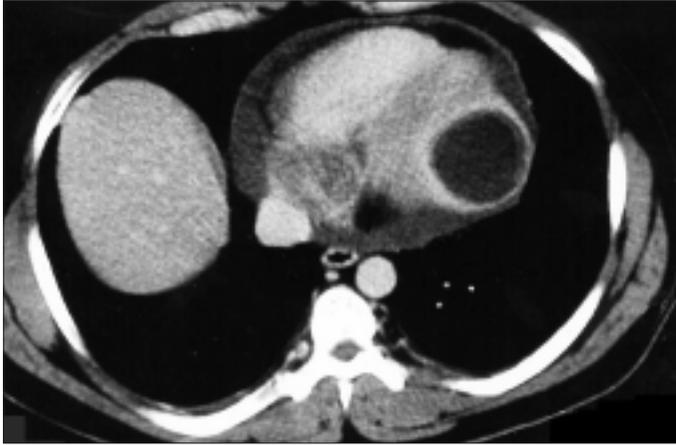


Figure 1. Computerized tomography view of left ventricular cardiac hydatid cyst

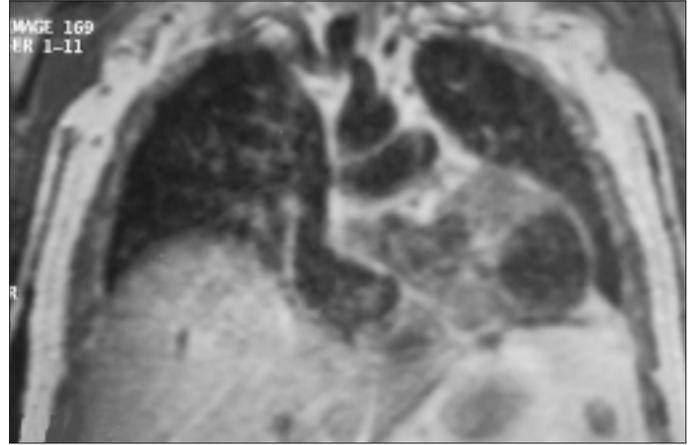


Figure 2. T1 weighted magnetic resonance imaging view showing hypointensive lateral wall cardiac hydatid cyst