

Congenital complete absence of the left pericardium in a patient with ascending aortic aneurysm

Çıkan aort anevrizması olan bir hastada sol perikardın konjenital total yokluğu

Özer Kandemir, Ülkü Yıldız, Benhur Can, Arzum Kale, Tevfik Tezcaner, Yaman Zorlutuna

Department of Cardiovascular Surgery, Bayındır Hospital, Ankara, Turkey

Congenital pericardial defects are rare anomalies. Asymptomatic clinical course causes difficulty in diagnosis, which frequently is made during other intrathoracic operations, post-mortem examinations or abnormal chest radiograms (1, 2).

A 38-year-old man was admitted to hospital with palpitation and dyspnea for 3-months. Routine chest roentgenogram demonstrated leftward displacement (Fig. 1). Transthoracic echocardiography showed an ascending aorta of 50mm in diameter with a third degree aortic regurgitation. Computed tomography showed aneurismal dilatation in ascending aorta of 53 mm in diameter. The patient was accepted for surgery. After cannulation of the right femoral artery, median sternotomy was performed and complete absence of the left pericardium was noticed (Fig. 2). Prosthetic graft replacement of the ascending aorta with aortic valve replacement (Bentall procedure) was performed. Cardiopulmonary bypass was discontinued and no further reconstruction was done against to the defected pericardium. Postoperative course was uneventful and patient was discharged on seventh postoperative day. Patient was found to be well doing and asymptomatic after 6 months.

Surgical intervention in asymptomatic patients is not re-

commended, unless complications develop. When the symptoms or complications occurred, many surgical repair procedures have been reported such as primary closure, partial pericardiectomy, atrial appendectomy and pericardioplasty (1-4).

References

1. Van Son JA, Danielson GK, Schaff HV, Mullany CJ, Julsrud PR, Breen JF. Congenital partial and complete absence of the pericardium Mayo Clinic Proc 1993; 68: 743-7.
2. Gatzoulis MA, Munk MD, Merchant N, Van Arsdell GS, McCrindle BW, Webb GD. Isolated congenital absence of the pericardium: clinical presentation, diagnosis and management. Ann Thorac Surg 2000; 69: 1209-15.
3. Matsuda N, Marumoto A, Nakashima H, Nakamura Y, Kamihira S, Ishiguro S, et al. Congenital pericardial defect associated with ruptured type A aortic dissection. Ann Thorac Surg 2004; 77: 1069-70.
4. Nakajima M, Tsuchiya K, Naito Y, Inoue H, Kobayashi K, Mizutani E. Partial pericardial defect associated with ruptured aortic dissection of the ascending aorta: a rare feature presenting severe left hemothorax without cardiac tamponade. Ann Thorac Surg 2004; 77: 1066-8.

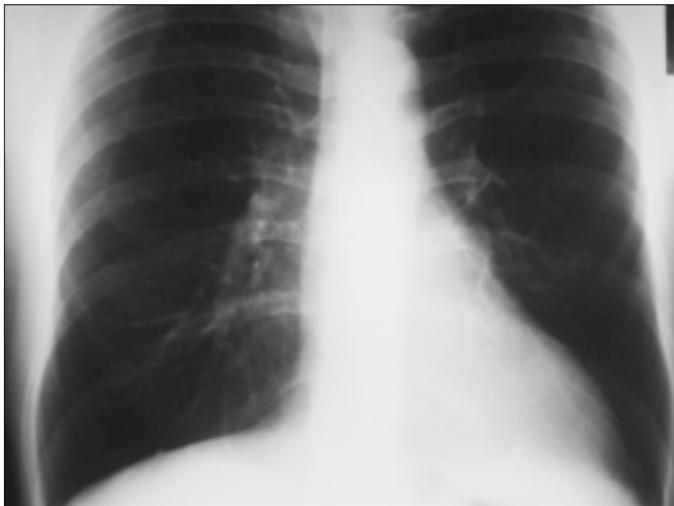


Figure 1. Preoperative chest radiography

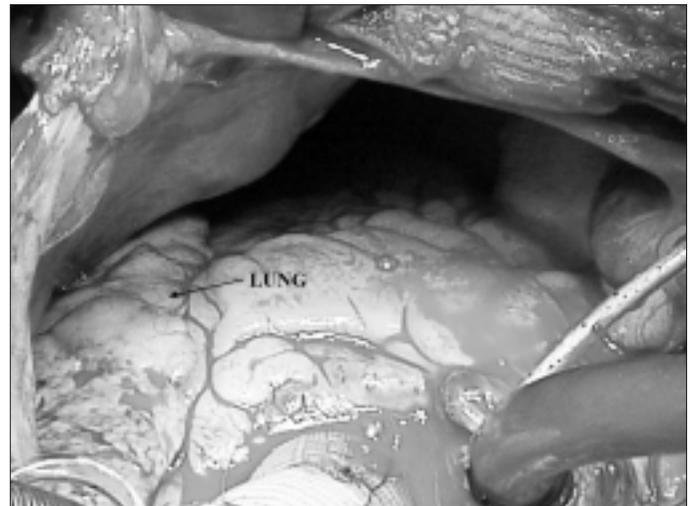


Figure 2. Intraoperative view of the complete absence of the left pericardium