Images in...

Pericardial cyst: a benign anomaly

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DESCRIPTION

A 54-year-old asymptomatic man was detected to have a prominent left heart border on a routine chest x-ray done during his annual health check (figure 1, arrows). Echocardiogram revealed a cystic lesion occupying the space antero-lateral to the right ventricular outflow tract (RVOT; figure 2). The cystic cavity did not produce any compression of the RVOT. CT of the chest showed a 6×4 cm homogeneous smooth-walled cyst with no evidence of contrast enhancement or calcification (figures 3 and 4) confirming a pericardial cyst. Repeat echocardiogram done 6 months later did not show any progression of size.

Pericardial cysts are rare congenital anomaly located in the mediastinum.¹ They are usually asymptomatic; but rarely produce symptoms based on their location and size.² Commonly they are located in the right cardiophrenic angle, followed by the left, antero-superior and posterior mediastinum.³ They are usually unilocular, well-marginated, spherical-shaped cysts lined with a single layer of mesothelial cells histologically.⁴ Most of the cysts are asymptomatic but occasional complications include obstruction of the RVOT, obstruction of the main bronchi and atelectasis, cardiac tamponade and sudden death.⁵ Imaging modalities include echocardiography, CT and

Figure 1 Chest x-ray showing prominence in the left heart border (arrows).

Figure 2 Echocardiograph (parasternal short axis view) showing a hypoechoic pericardial cyst which is to the left and anterior to the pulmonary artery. Ao, aorta; PA, pulmonary artery; RVOT, right ventricular outflow tract.

MRI.¹ Usually close follow-up is sufficient in asymptomatic patients. Percutaneous drainage and surgical resection are the usual treatment modalities for symptomatic individuals.

Figure 3 Contrast-enhanced CT of the chest, transverse view showing the cyst (Cy) in relation to the pulmonary artery (P) and aorta (A).

Figure 4 Contrast-enhanced CT of the chest, coronal section showing the relationship of the cyst (Cy) to the pulmonary artery (P) and aorta (A).

Competing interests None.

Patient consent Obtained.

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Learning points

- Pericardial cysts are rare benign mediastinal masses usually detected in asymptomatic individuals.
- Rare complications include compression of the bronchi, ventricular outflow tract, rupture with tamponade and sudden death.
- Treatment in symptomatic individuals includes surgical resection or percutaneous aspiration.

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