Isolated pericardial hydatid cyst: anatomical details on 64 slice multidetector CT scanner

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DESCRIPTION
Cardiac involvement is uncommon (0.02–2%)1 in hydatid disease and the most common location is in the left ventricle, followed by interventricular septum and right ventricle. The clinical presentation of hydatid disease depends on the location of the cysts, and diagnosis is usually made by CT and/or high-resolution MRI.2

We are presenting an extremely rare manifestation of hydatid disease in the pericardial sac. Our patient, a 78-year-old woman of South-Asian descent presented with non-specific chest pain, and we are presenting the striking diagnostic images of a rare manifestation of hydatid disease obtained through the multiplanar capabilities of 64 slice CT scanner, which demonstrates the anatomical details, calcifications and internal architecture of this rare disease in an uncommon location (figures 1–3).

Abdominal ultrasonographic evaluation revealed no other cystic lesion either in the liver or other abdominal organs.

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Learning points

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Competing interests None.
Patient consent Obtained.

Figure 1 Contrast-enhanced axial section shows multilocular smooth-walled cystic lesion with peripheral wall calcification and multiple daughter cysts arising from the pericardium of left ventricular wall: characteristic hydatid cyst.

Figure 2 Contrast-enhanced coronal processed image shows the relation of the cyst with left ventricle and pericardium and mass effect on pulmonary artery. Peripheral wall calcification can be seen.
REFERENCES


**Figure 3** Contrast-enhanced sagittal processed image shows the antero-posterior relation with mediastinal structures and pericardial origin of left ventricle.