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IMAGES IN CARDIOLOGY

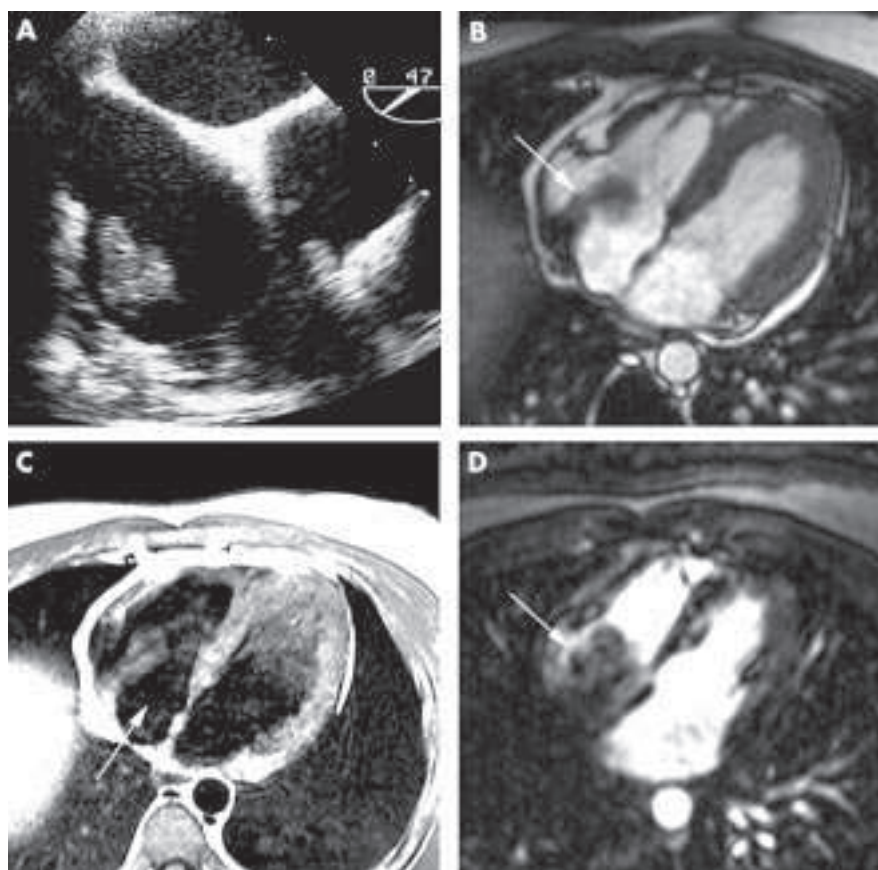
Right atrium and testis tumour: is there a link?

A 26 year old man with a recently diagnosed germinal testicular tumour treated by orchidectomy and chemotherapy started to complain of chest pain and fever after insertion of a port-a-cath. Because blood culture revealed methicillin resistant *Staphylococcus aureus* (MRSA), the port-a-cath was removed. Transoesophageal echocardiography (panel A) showed a mass in the right atrium. At this time, chemotherapy was stopped and antibiotics were started.

Four possible diagnoses were proposed: cardiac metastasis of the testis neoplasm, early heart tumour, or endocarditis or thrombus related to the port-a-cath insertion.

Cine magnetic resonance imaging showed the presence of a single very mobile mass with a large base implanted on the posterior atrial wall (panel B). There was no extension to the vena cava. On T1 imaging, the mass appeared homogenous (panel C). After injection of 15 ml Gd-DTPA, there was no enhancement of the mass, suggesting a benign nature (panel D).

Lateral thoracotomy and atriotomy without extracorporeal circulation was performed to extract the mass. Pathology confirmed the thrombotic nature of the tumour. This very large thrombus was probably related to the traumatic insertion of the malpositioned port-a-cath. Following surgery, antibiotics and anti-coagulants were continued, with a favourable clinical outcome for the patient.



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