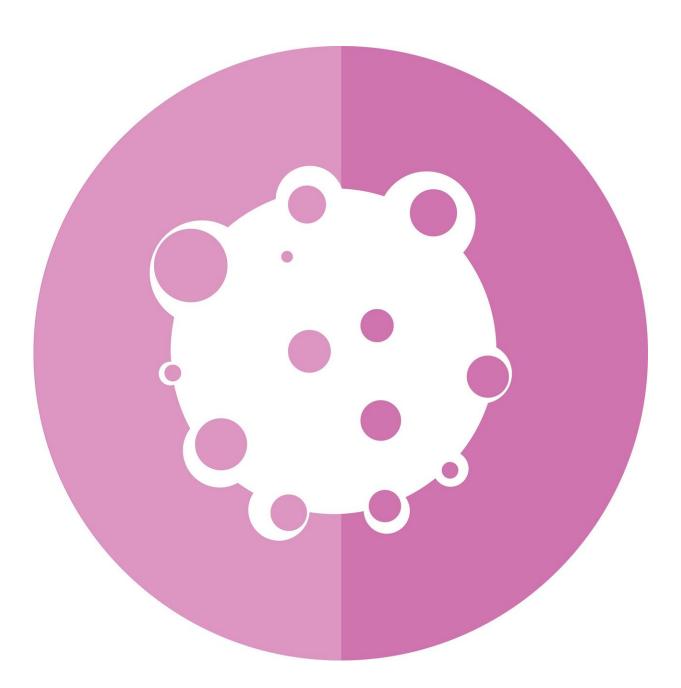


Mediastinal tuberculoma mimicking malignant cardiac tumor

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In a new publication from *Cardiovascular Innovations and Applications*, Yiqian Ding, Wei Li, Yanqiu Liu, Min Ye, Liangping Cheng, Donghong Liu, Hong Lin and Fengjuan Yao from The First Affiliated Hospital, Sun Yat-sen University, Guangzhou, China consider mediastinal tuberculoma mimicking malignant cardiac tumors.

In this report the authors present a rare case of mediastinal tuberculoma mimicking a malignant cardiac <u>tumor</u> before operation and was finally diagnosed as cardiac tuberculoma by postoperative pathological examination. The clinical manifestations of cardiac masses are diverse and lack specificity, which makes it difficult for clinicians to detect and distinguish cardiac masses. Cardiac tumors are rare but can be associated with high morbidity and mortality.

In recent years, more and more noninvasive imaging methods have been used for cardiac lesions. Two-dimensional <u>echocardiography</u> is considered to be a guiding standard imaging examination for the evaluation of cardiac masses. Contrast-enhanced perfusion echocardiography (CEUS) has advantages in distinguishing masses from benign and malignant tumors.

Although the case was initially not diagnosed by echocardiography and CT because of the variability of tuberculosis, Transthoracic echocardiography (TTE) is still considered the first line imaging modality for the assessment of cardiac masses. CEUS can confirm the presence of a cardiac or mediastinal mass and provide information on perfusion, which is used to complement TTE with improved detection of benign or malignant masses. Multimodality imaging in the evaluation of cardiac masses plays a pivotal role.



More information: Fengjuan Yao. Mediastinal Tuberculoma Mimicking Malignant Cardiac Tumor: A Case Report, *Cardiovascular Innovations and Applications* (2020). DOI: 10.15212/CVIA.2019.0587

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