

## **A BIG MASS AROUND THE HEART: SHOULD I BE WORRIED?**

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Lipomas account for about 10% of all cardiac tumors and symptoms are often secondary to the compression of cardiac chambers and the consequent hemodynamic impact.

We report the case of a 76-year-old woman with no cardiological history, undergoing oncological follow-up for breast cancer underwent a left radical mastectomy in 2014, not followed by radiotherapy or chemotherapy, who came to our attention due to the identification at the total-body CT scan of a mediastinal mass. A voluminous intrapericardial formation was detected, with a maximum size of 5.4 x 8.6 cm, characterized by adipose attenuation values at baseline.

On examination, the patient was asymptomatic and eupneic, in good hemodynamic compensation, in functional class NYHA I.

The ECG showed sinus rhythm with regular atrioventricular and intraventricular conduction without significant alterations in repolarization.

On the echocardiogram, the left ventricle appeared of normal size and thickness without alterations in the global and segmental systolic function, EF 65%; the right ventricle was regular in size and contractility; a voluminous pericardial mass of about 8 x 4.5 cm was observed in the inferior, posterior and lateral site, homogeneous, not vascularized, not compressing the cardiac cavities and not determining hemodynamic impact.

The patient was then submitted to cardiac MRI which confirmed the suspicion of intrapericardial lipoma. Considering the absence of symptoms, the benign nature of the lesion and the absence of compression on the cardiac structures, we decided not to remove the mass and to continue clinical and radiological follow-up, thus monitoring size and symptoms.