

RADIOLOGY IMAGING

Giant right atrial mass obliterating the right atrium

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A 73-year-old man with past medical history of mechanical aortic valve replacement, metastatic melanoma of unknown primaries with liver metastasis, presented with progressive shortness of breath and dyspnea on exertion. Transthoracic echocardiography (TTE) showed a large homogenous mass completely occupying the right atrial cavity and extending to and nearly obstructing the inflow area of the tricuspid valve. He was treated with chemotherapy.

Keywords: *Atrial mass; Atrial tumor; Atrial thrombus; Metastatic melanoma*

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A 73-year-old patient with past medical history of mechanical aortic valve replacement and metastatic melanoma of unknown primaries with liver metastasis presented with progressive shortness of breath and dyspnea on exertion. A computerized tomography (CT) scan of the chest showed a large right atrial mass and tumor thrombus invading from the inferior vena cava

(IVC). CT of the abdomen showed a large heterogeneously enhancing hepatic metastasis with tumoral thrombus in the IVC. Transthoracic echocardiography was done, which showed a large homogeneous mass completely occupying the right atrial cavity and extending to and nearly obstructing the inflow area of the tricuspid valve (Fig. 1). The patient was too sick to have transesophageal echocardiography. The mass was likely a metastatic melanoma; however, we have no tissue diagnosis from the mass as the patient was not a candidate for invasive procedure.

The patient was evaluated by cardiothoracic surgery and was not felt to be a good surgical candidate. He was treated with chemotherapy (1). He was discharged with cardiothoracic surgery follow-up for possible outpatient CyberKnife treatment.

Conflict of interest and funding

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Reference

1. Kuriakose R, Melvani R, Gangadharan V, Cowley M. Right atrial metastatic melanoma with unknown primaries. *Case Rep Cardiol* 2015; 2015: 483520, doi: <http://dx.doi.org/10.1155/2015/483520>

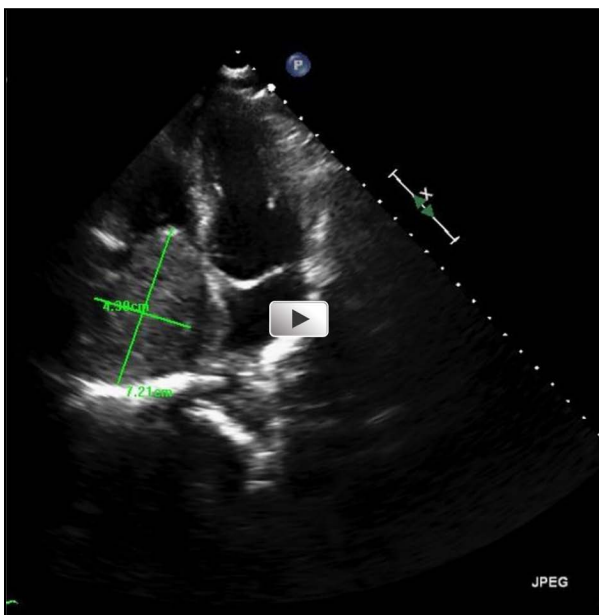


Fig. 1. Apical four-chamber view of transthoracic two-dimensional echocardiography revealing the large right atrial mass.