Cardiac Angiosarcoma and Hepatic Hemangioma

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A 62-year-old-Japanese man was admitted to our hospital because of a cardiac tumor. He had no symptoms. Magnetic resonance image performed for the precise evaluation of the hepatic tumor revealed a cardiac tumor in the atrial septum in addition to a hepatic tumor (**Figure A,B**). Those tumors did not connect with each other (**Figure C**). Chest X-ray and electrocardiography were normal. Transthoracic echocardiography revealed a large mass protruding into the bilateral atria (right atrium, 3.8×3.5×3.2 cm; left atrium, 3.4×3.4×2.7 cm) (**Figure D**). Laboratory data were normal. Coronary angiography demonstrated tumor-staining (**Figure E**). The cardiac tumor was completely resected 1 week after admission (**Figure F,G**). Histologically, large atypical cells formed lumen and irregular anastomosing vascular networks (**Figure H,I**). Immunohistochemically, those cells were positive for CD31 (**Figure J**), CD34 (**Figure K**), and Factor VIII (**Figure L**). Therefore, this tumor was diagnosed as cardiac angiosar-

coma. Seven weeks after the operation, the hepatic tumor was resected. Pathological examination indicated typical cavernous hemangioma (**Figure M**). No additional treatment was decided at the meeting with oncologists.

As a coexisting cardiac angiosarcoma and hepatic hemangioma is very rare, this patient should be observed carefully.

Disclosures

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Figure. Magnetic resonance image demonstrates a cardiac tumor (arrows) and a hepatic tumor (arrow heads) (**A**, T1-weighted image; **B** and **C**, T2-weighted image). Transthoracic echocardiography shows a cardiac mass (**D**; RA, right atrium; LA, left atrium; RV right ventricle; LV, left ventricle). Coronary angiography shows tumor staining (**E**). The tumor is dumbbell-shaped (**F**) and the inside is red (**G**). Histopathology shows cardiac angiosarcoma [hematoxylin and eosin (**H,I**); immunostaining for CD31 (**J**), CD34 (**K**), and Factor VIII (**L**)], and hepatic cavernous hemangioma (**M**).