[PICTURES IN CLINICAL MEDICINE]

Primary Lymphoma of the Pericardium

Shintaro Kinoshita¹, Jun Ando^{1,2}, Miki Ando¹ and Norio Komatsu¹

Key words: pericardium, primary cardiac lymphoma, right heart failure

(Intern Med Advance Publication)

(DOI: 10.2169/internalmedicine.7643-21)

Picture.

An 81-year-old woman was admitted for right heart failure with complete atrioventricular block. Chest computed tomography (CT) revealed disseminated nodular lesions of the pericardium (Picture a), and positron emission tomography-CT revealed an uptake only along the pericardium (Picture b), with a maximal standardized uptake value of 9.56. A pericardial biopsy showed infiltration by intermediate-sized to large atypical lymphocytes expressing the B-cell marker CD20 (Picture c, d). Diffuse large B-cell lymphoma, not otherwise specified (WHO 2016 classification) was diagnosed. Vincristine and prednisolone were initiated for cytoreduction before rituximab treatment, and her condition temporarily improved, but sepsis occurred, and the patient

died of multi-organ failure. Primary cardiac lymphoma is extremely rare, accounting for only 0.15% of all non-Hodgkin lymphomas. For only pericardial disease to be demonstrable is even rarer (0.05%) (1, 2). In patients like ours, malignancy should always be considered. Our experience underscores the importance of a pericardial biopsy for a definitive diagnosis.

The authors state that they have no Conflict of Interest (COI).

References

1. Jeudy J, Burke AP, Frazier AA. Cardiac Lymphoma. Radiol Clin

¹Department of Hematology, Juntendo University School of Medicine, Japan and ²Department of Transfusion Medicine and Stem Cell Regulation, Juntendo University School of Medicine, Japan

Received: April 3, 2021; Accepted: April 25, 2021; Advance Publication by J-STAGE: June 12, 2021

Correspondence to Dr. Miki Ando, m-ando@juntendo.ac.jp

North Am **54**: 689-710, 2016.

2. Jonavicius K, Salcius K, Meskauskas R, Valeviciene N, Tarutis V, Sirvydis V. Primary cardiac lymphoma: two cases and a review of literature. *J Cardiothorac Surg* **10**: 138, 2015.

The Internal Medicine is an Open Access journal distributed under the Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License. To view the details of this license, please visit (<https://creativecommons.org/licenses/by-nc-nd/4.0/>).

© The Japanese Society of Internal Medicine
Intern Med Advance Publication