

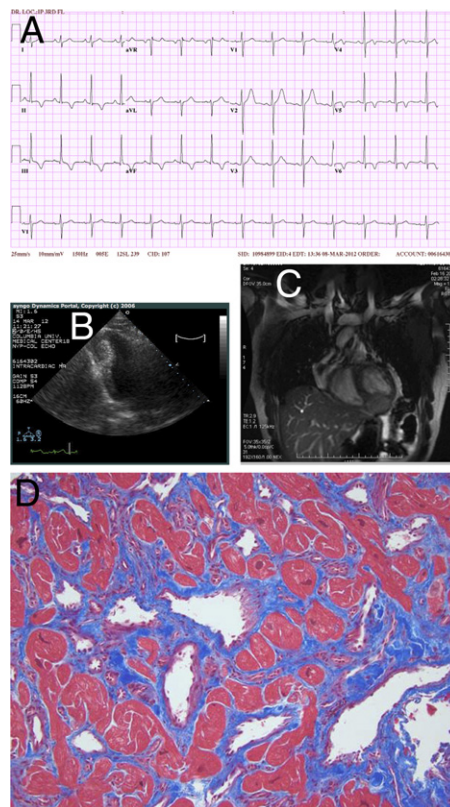
IMAGES IN CARDIOLOGY

Asymptomatic Left Ventricular Mass

Prepare for the Worst, Hope for the Best

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An asymptomatic 20-year-old man was found to have marked repolarization abnormalities on a screening electrocardiogram (A). Transthoracic echocardiogram revealed a 3.8 × 2.3 cm echo-bright mass near the left ventricular apex contained within the inferior-inferolateral wall (B). Cardiac magnetic resonance confirmed a 3.8 × 2.1 × 2.8 cm homogenous, enhancing mass in the inferior wall of the left ventricle near the apex (C). Signal characteristics and enhancement pattern were nonspecific. Differential diagnosis included benign (rhabdomyoma, fibroma, hemangioma) and malignant tumors (sarcoma, lymphoma). Full-body positron emission tomography revealed a hypermetabolic cardiac mass without evidence of extra-cardiac fluorodeoxyglucose-avid disease. Core biopsy via left thoracotomy with provisional resection of the mass and left ventricular reconstruction or implantation of a SynCardia total artificial heart as a bridge to cardiac transplantation was pursued. Pathology revealed myocardium with a benign vascular proliferation with fibrous tissue consistent with a hemangioma (D). No resection was performed. The patient will be followed closely.