

Lung Tumor Invading the Right Atrium

ALBERTO J. CAPELLO¹

These images belong to a 47-year-old male patient who smokes 30 cigarettes per day. Two weeks before his admission, he presented submandibular lymphadenopathies followed by hemoptysis and dispnea. At the moment of his hospitalization, he presented collateral circulation on the anterior face of the thorax, short cape edema and semiology of the right pleural effusion (Figure 1). Within routine examinations, an electrocardiogram was performed. A tumor mass, which comes from the superior vena cava (Figure 2) and that invaded the right atrium (Figure 3) was observed in the ECG. The presence of an undifferentiated carcinoma of possible pulmonary origin was determined through lymph node biopsy.

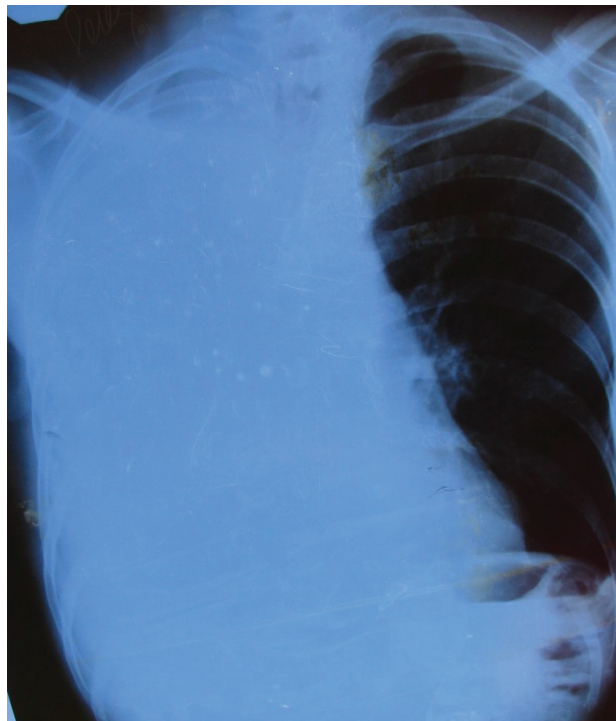


Fig. 1.

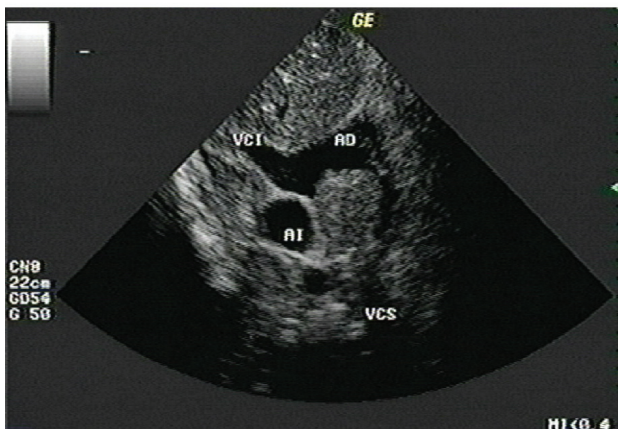


Fig. 2.



Fig. 3.

¹ Echocardiography and Non-Invasive Hemodynamics Laboratory - C.E.T.E.M. Formosa, Argentina
www.eco-lab.com.ar
e-mail: aljorcap@yahoo.com.ar