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Recurrent undifferentiated pleomorphic sarcoma of the left atrium in a 39-year old Filipino male, a case report

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Primary left atrial sarcomas are exceptionally rare. Definitive diagnosis is done through tissue biopsy to differentiate myxomas from highly aggressive sarcomas. Complete surgical resection is still the mainstay treatment for these tumors. However, this becomes less likely as an option in cases where there is local expansion and/or the presence of distant metastases at the time of diagnosis. Use of adjuvant chemotherapy has been reported. However, because of the rarity of primary cardiac sarcomas, the results are speculative and inconclusive. Despite optimal management, the rates of local recurrence and distant metastasis are high. Overall prognosis is poor with a mean survival range from 9.6 to 16.5 months. The author presents a rare case of a recurrent primary cardiac sarcoma of undifferentiated pleomorphic type, its clinical presentation, diagnosis, histopathologic features, management and prognosis. The study begins with a 39-year old asthmatic Filipino male initially presented with worsening dyspnea. Further work-up revealed an echogenic mass attached to the anterolateral wall of the left atrium oscillating in and out into the left ventricle seen on echocardiography. Surgical resection of the tumor was done. Histopathology confirmed that the mass was a myxoid undifferentiated pleomorphic sarcoma. Fourteen months after resection, he presented with local recurrence. There was also noted bone, lung and lymphatic metastases. Considering the presence of systemic involvement and a broad-base structural anatomy of the mass, repeat tumor resection was not done and the patient was ultimately managed with single-agent chemotherapy of doxorubicin. Sixteen months from the time of initial diagnosis, the patient eventually succumbed. The management of primary cardiac sarcomas requires a multidisciplinary approach for optimal patient care and survival. Surgical excision is the mainstay of treatment for cardiac sarcomas, however this is dependent with the resectability of the mass and status of distant involvement or metastasis. Because of its rarity, data regarding chemotherapy response is limited and inconclusive. Their aggressive behavior and current limited therapeutic options contribute to poor prognosis.