Germ cell tumour compressing the right atrium

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Germ cell tumours are relatively rare and most commonly described in the gonads. These tumours can also be seen in other locations, such as in the retroperitoneum, the pineal gland, mediastinum, and sacral area. Primary mediastinal germ cell tumours are very rare and have been documented in the literature as only sporadic cases [1].

A 22-year-old man was admitted to our department due to shortness of breath and palpitations. On apical four-chamber view, echocardiography showed a mass compress-

ing the right atrium (Fig. 1). There were no other cardiac or valvular abnormalities.

Thoracic and abdominal computed tomography (CT) scans were obtained to evaluate the potential causes of this mass. Thorax CT scans showed a tumour mass compressing the right atrium (Fig. 2). After excluding cardiac causes, he was referred to the Chest Clinic for advanced evaluation. They performed ultrasound-guided fine-needle aspiration biopsy of the thorax. He was

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Fig. 1 Apical four-chamber echocardiographic view of germ cell tumour compressing the right atrium (RA)

Fig. 2 Thorax CT scan imaging of germ cell tumour compressing the right atrium (RA). Tm = tumour mass

diagnosed with extragonadal germ cell tumour. Bleomycin, etoposid and cisplatin (BEP) chemotherapy was administered every 3 weeks. After 4 cycles of chemotherapy, the residual tumour was resected completely. Alpha-phetoprotein and human chorionic gonadotropin are within the normal limits and to date tumour recurrence has not been detected.

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Reference

1. Wychulis AR, Payne WS, Clagett OT, et al. Surgical treatment of mediastinal tumors: a 40-year experience. *J Thorac Cardiovasc Surg.* 1971;62:379–92.