

Pericardial Echinococcosis, Case Presentation and Literature Review

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Objectives:In this report, a rare case of isolated pericardial hydatid cyst associated with pericardial effusion is described. Literature review, diagnosis, management and outcome are presented.

Background:Echinococcosis presents commonly in the liver (60–70%) and lungs (10–15%). Cardiac and pericardial echinococcosis are rare (0.5–2%) and usually associated with liver and lungs involvement. Morbidity and mortality in these cases arise primarily from complications prior to, during or after surgery.

Case Report: An 11 year old female was admitted for evaluation of new onset fever and chest pain. She was subsequently diagnosed to have pericardial echinococcosis. Clinical examination and initial work up including chest X-ray showed enlarged cardiac silhouette suspicious for pericardial effusion. Transthoracic echocardiography showed pericardial effusion and multiple, well defined cysts (hydatid cysts) in the pericardium. Medical treatment was initiated in the form of benzimidazole (broad-spectrum anthelmintic). Successful surgical excision of the cysts and pericardiocentesis were performed. The patient was discharged home to continue medical treatment for 6 months.

Conclusion: Treatment of cardiac Echinococcosis requires a combined medical and surgical approach. Early diagnosis and management is associated with favorable outcome.