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CARDIOVASCULAR FLASHLIGHT

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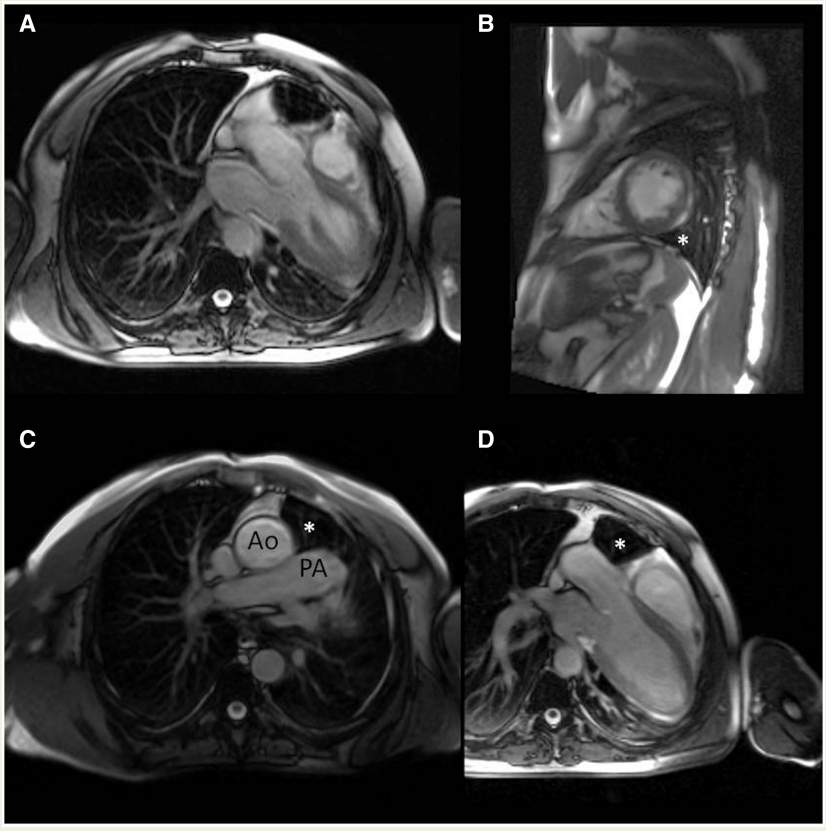
Pericardial agenesis: a rare cause of chest pain

Cátia Costa Oliveira [1,2,3], Catarina Vieira[1], Nuno Bettencourt[1], and Vitor Hugo Pereira [1,2,3]*

[1]Cardiology Department, Hospital de Braga, Sete Fontes - São Victor, 4710-243 Braga,, Portugal; [2]Life and Health Sciences Research Institute (ICVS), School of Health Sciences, University of Minho, Campus de Gualtar, 4710-057 Braga, Portugal; and [3]ICVS/3B's-PT Government Associate Laboratory, Braga/Guimarães, Portugal

* Corresponding author. Tel: +351 253 604 931, Email: pereira.vitorhugo@gmail.com

A 58-year-old male was referred to the cardiology department for the study of persistent atypical chest pain. The electrocardiogram showed sinus bradycardia, right axis deviation with incomplete right bundle branch block, and T-wave inversion on the precordial and inferior leads. The transthoracic echocardiography displayed a 'teardrop' shape of the heart with an abnormal cardiac motion. The cardiac magnetic resonance demonstrated an accentuated leftward rotation of the heart (*Panel A*; axial balanced Steady-State Free Precession, bSSFP; cine sequences available as Supplementary material), interposition of lung tissue between the diaphragm and the heart (*Panel B*; short-axis cine bSSFP), between the aorta and the pulmonary artery (*Panel C*; axial; bSSFP asterisk: lung tissue; Ao, aorta; PA, pulmonary artery) and between the aorta and the right ventricle (*Panel D*; long-axis bSSFP). These findings are highly specific for pericardial agenesis.



Congenital complete pericardial agenesis is a very rare entity with an overall incidence of <1:10 000. Although it is usually asymptomatic, some patients experience atypical chest pain secondary to exaggerated cardiac motion. Cardiac magnetic resonance is usually the preferred method of diagnosis.

Conflict of interest: The authors have submitted their declaration which can be found in the article Supplementary Material online.

Supplementary material is available at *European Heart Journal* online.