

# A Rare Case of Primary Pericardial Malignant Mesothelioma that was Difficult to Differentiate Preoperatively from a Mediastinal Tumor

Yasuhiro YOSHIDA<sup>1</sup>, Yoshihumi MAKIMOTO<sup>1</sup>, Sousei ABE<sup>1</sup>,  
Asahi NAGATA<sup>1</sup>, Sou MIYAHARA<sup>1</sup> <sup>3</sup>, Wakako HAMANAKA<sup>1</sup>,  
Jun YANAGISAWA<sup>1</sup>, Daisuke HAMATAKE<sup>1</sup>, Masahumi HIRATSUKA<sup>1</sup>,  
Yasuteru YOSHINAGA<sup>1</sup>, Takeshi SHIRAISHI<sup>1</sup>, Makoto HAMASAKI<sup>2</sup>,  
Kazuki NABESHIMA<sup>2</sup> <sup>3</sup> and Akinori IWASAKI<sup>1</sup>

<sup>1</sup> *Department of General Thoracic, Breast, Endocrine, and Pediatric Surgery,  
Faculty of Medicine, Fukuoka University*

<sup>2</sup> *Department of Pathology, Fukuoka University Hospital*

<sup>3</sup> *Department of Pathology, Faculty of Medicine, Fukuoka University*

**Abstract**: Primary pericardial malignant mesothelioma is rare disease occurring in 0.7-2.0% of all mesotheliomas. A 69-year-old female was admitted to Fukuoka University Hospital under a diagnosis of cardiac tamponade due to a mediastinal tumor. Her chest X-ray and CT examinations showed a large mass at the base of the heart and massive pericardial and bilateral pleural effusion. A cytological examination of the pericardial and pleural effusion did not revealed the presence of atypical cells. A mediastinal tumor biopsy by thoracoscopy led to a diagnosis of malignant mesothelioma. We attempted to resect the tumor, but ended up performing a pericardiectomy due to tumor adherence to the ascending aorta and main pulmonary artery.

**Key words**: Pericardial mesothelioma, Malignant mesothelioma, Cardiac Tamponade, Mediastinal tumor