

CT

1

2

3

(left atrial appendage)

CT

5 - 10%

(Fig. 1A).

(1),

(2 - 4).

(left atrial appendage)
, CT

CT

CT

가

(Fig. 1B).

가

가,

(centripetal)

(Fig. 1C, D).

(coronal multiplanar reconstruction image)

(left atrial appendage)

(displacement)

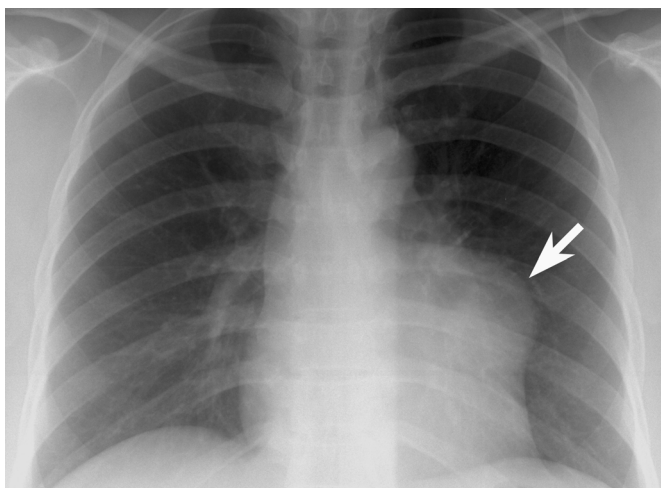
(ovoid)

(Fig. 1E).

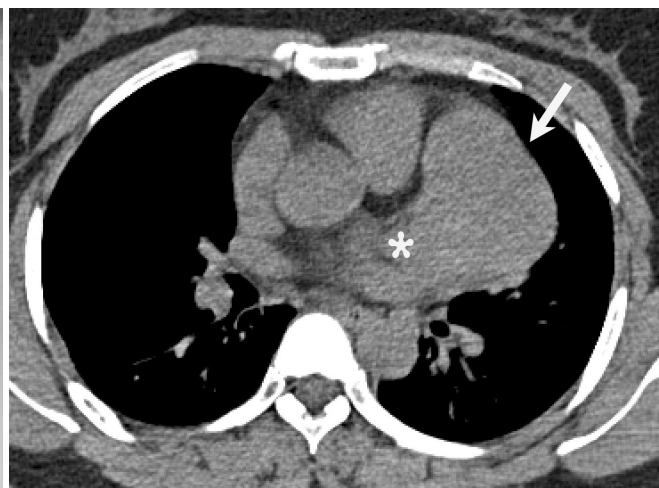
45

가

(cardiac border)



A



B

Fig. 1. Cardiac hemangioma in a 45-years-old women.

A. Chest radiograph shows smooth bulging appearance of left cardiac border (arrow).

B. Unenhanced CT scan reveals a well-marginated mass (arrow) to the anterolateral aspect of the left atrium (asterisk).

1
2
3

2006 10 17

2007 3 22

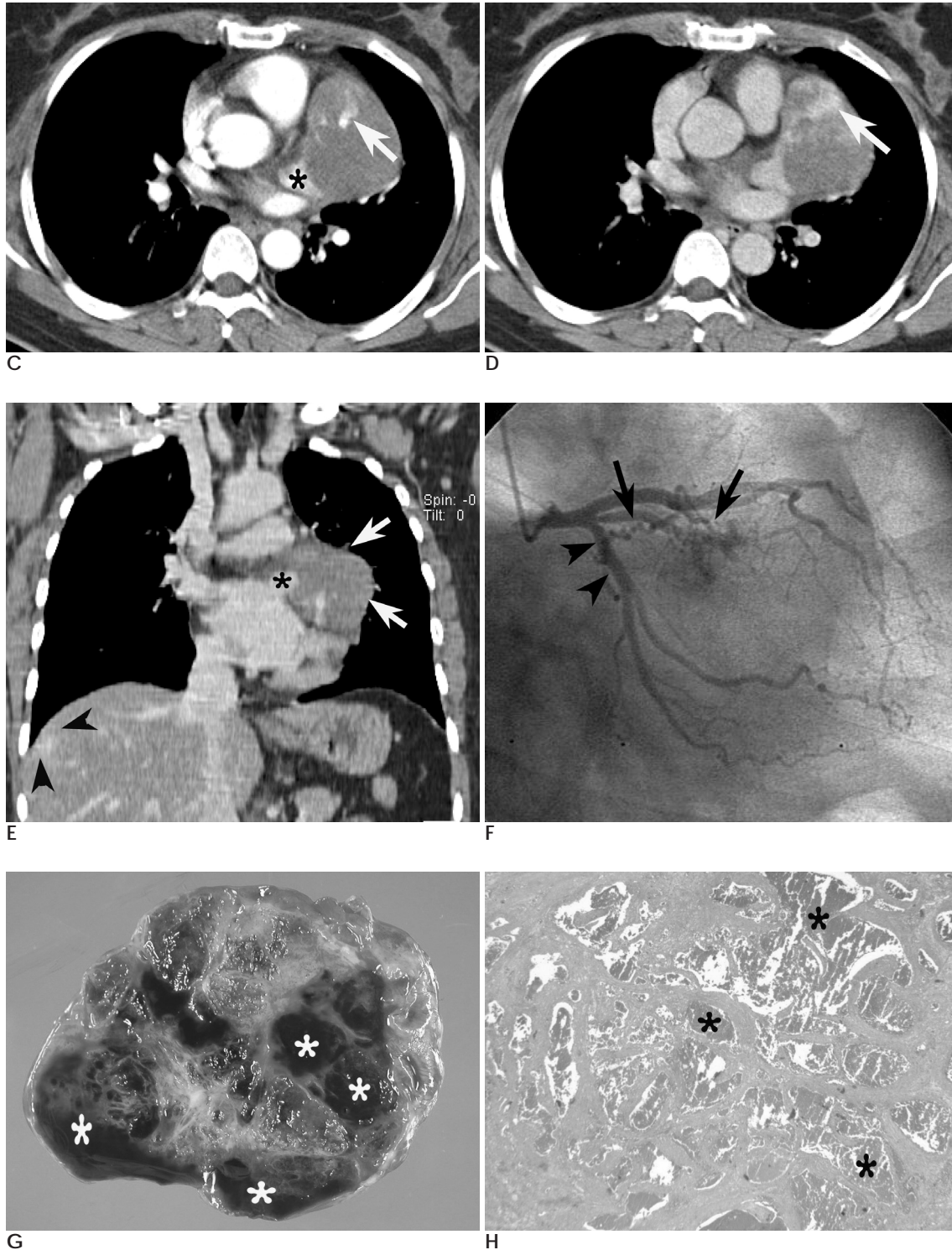


Fig. 1. C. After contrast injection, the mass shows peripheral nodular enhancement (arrow) on arterial phase. D. On delayed phase, the mass shows centripetal progression of enhancement on delayed phase (arrow). E. Coronal multiplanar reconstruction shows ovoid mass (arrows) attached to and medial displacement of left atrial auricle (asterisk). Also note incidental finding of hepatic hemangioma (arrowheads). F. Coronary angiography right anterior oblique projection reveals abnormal tortuous vessel (arrows) arising from left circumflex artery (arrowheads). G. Photograph of cut-surface of specimen shows many cystic spaces containing blood and blood clot (asterisks). H. Photomicrograph of histologic specimen shows cavernous vessels and smaller capillary channels filled with red blood cells (asterisks) (hematoxylin-eosin stain, $\times 40$).

(left circumflex artery) (Fig. (myxoid component)

1F). (pedicle) 가 (sarcoma)

(7×5.3×3 cm, 54.2 mg), (base) 가
(blood) (blood clot) (Fig. (3). 가
1G). (cavernous 가
hemangioma) (Fig. 1H). , 80%
(vascular blush) (9).
CT
(ECG - gated coronary CTA)

100,000

1.7 (4). , 가
75% , 75% (myxoma)
5 -
10% .

(right ventricle)
(35.7%), (left ventricle; 33.9%),
(right atrium; 23.2%) (interatrial septum;
10.7%) (5).
7.1% (5). 가
가 (6).
(dyspnea on exertion), (syncope),
(arrhythmia), (pericarditis),
(pericardial effusion), (sudden death)
(2, 3, 6). ,
가 (7, 8), 가
가
(4). CT
(2, 3). CT
(3). 가

1. Burke A, Virmani R. *Tumors of the heart and great vessels*. In: *Atlas of Tumor Pathology*. 3rd series, fasc 16. Washington, DC: Armed Forces Institute of Pathology; 1996
2. Oshima H, Hara M, Kono T, Shibamoto Y, Mishima A, Akita S. Cardiac hemangioma of the left atrial appendage: CT and MR findings. *J Thorac Imaging* 2003;18:204-206
3. Grebenc ML, Rosado de Christenson ML, Burke AP, Green CE, Galvin JR. Primary cardiac and pericardial neoplasms: radiologic-pathologic correlation. *Radiographics* 2000;20:1073-1103
4. Thomas JE, Eror AT, Kenney M, Caravalho J Jr. Asymptomatic right atrial cavernous hemangioma: a case report and review of the literature. *Cardiovasc Pathol* 2004;13:341-344
5. Kojima S, Sumiyoshi M, Suwa S, Tamura H, Sasaki A, Kojima T, et al. Cardiac hemangioma: a report of two cases and review of the literature. *Heart Vessels* 2003;18:153-156
6. Strauss R, Merliss R. Primary tumors of the heart. *Arch Pathol* 1945;39:74-78
7. Weston CF, Hayward MW, Seymour RM, Stephen MR. Cardiac haemangioma associated with a facial port-wine stain and recurrent atrial tachycardia. *Eur Heart J* 1988;9:668-671
8. Burke A, Johns JP, Virmani R. Hemangiomas of the heart: a clinicopathologic study of ten cases. *Am J Cardiovasc Pathol* 1990;3:283-290
9. Brizard C, Latremouille C, Jebara VA, Acar C, Fabiani JN, Deloche A, et al. Cardiac hemangiomas. *Ann Thorac Surg* 1993;56:390-394

Cardiac Hemangioma of the Left Atrial Appendage Associated with Hepatic Hemangiomas: The CT and Coronary Angiographic Findings¹

Mi-Jin Kang, M.D., Joung Sook Kim, M.D., Soo Jeon Choi, M.D.², Cheol Min Song, M.D.³

¹*Department of Radiology, Sanggye Paik Hospital, Inje University College of Medicine*

²*Department of Internal Medicine, Sanggye Paik Hospital, Inje University College of Medicine*

³*Department of Cardiothoracic Surgery, Sanggye Paik Hospital, Inje University College of Medicine*

Cardiac hemangioma is a rare benign tumor of the heart. We report here on a case of cardiac hemangioma that originated from the left atrial appendage; this was observed on the CT and coronary angiographic findings and the lesion was pathologically proved.

Index words : Angioma
Heart, CT
Coronary angiography
Heart, neoplasms

Address reprint requests to : Joung Sook Kim, M.D., Department of Radiology, Sanggye Paik Hospital, Inje University College of Medicine
761-1 Sanggye 7-dong Nowon-gu, Seoul 139-707, Korea
Tel. 82-2-950-1189 Fax. 82-2-950-1220 E-mail: sugirad@hanmail.net