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Primary intracardiac burkitt's lymphoma in a teenager: case report and review of literature

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INTRODUCTION

Intracardiac Burkitt Lymphomas are rare. A literature review using the terms "Burkitt" and "cardiac“ showed only 28 cases reported between 1975-2023. Among the patients, only 9 were part of the pediatric population. This report seeks to complement the current literature by describing the case of a 13-year-old teenager with Intracardiac Burkitt Lymphoma.

CLINICAL SUMMARY

In May 2023, a 13-year-old male with a previous history of blunt trauma to the chest was evaluated for a non-obstructive pericardial effusion. A diagnostic pericardial puncture was performed which showed an increased ADA. The patient had a positive epidemiology for tuberculosis, and it was decided to start treatment accordingly. Monthly echocardiograms were performed, and, in November 2023, a routine examination showed an image in the right atrium suggestive of a local thrombus. A subsequent magnetic resonance imaging confirmed the presence of an intracardiac mass.

The patient rapidly evolved with obstructive shock and was placed on ECMO.

A biopsy of the lesion revealed Burkitt Lymphoma. There was no good response to isolated dexamethasone, and it was decided to add vincristine and cyclophosphamide to cytoreduction. This led to the clearance of the right cardiac cavities within 48 hours and to resolution of the cardiogenic shock. The patient has been treated with institutional Non-Hodgkin’s Lymphoma protocol since then with good evolution.

DISCUSSION

Intracardiac lymphomas are rare in pediatrics, and primary cardiac Burkitt Lymphomas are even more uncommon. Due to its predisposition to rapid growth and high risk of early death, this pathology should be suspected in cases of intracardiac tumors.