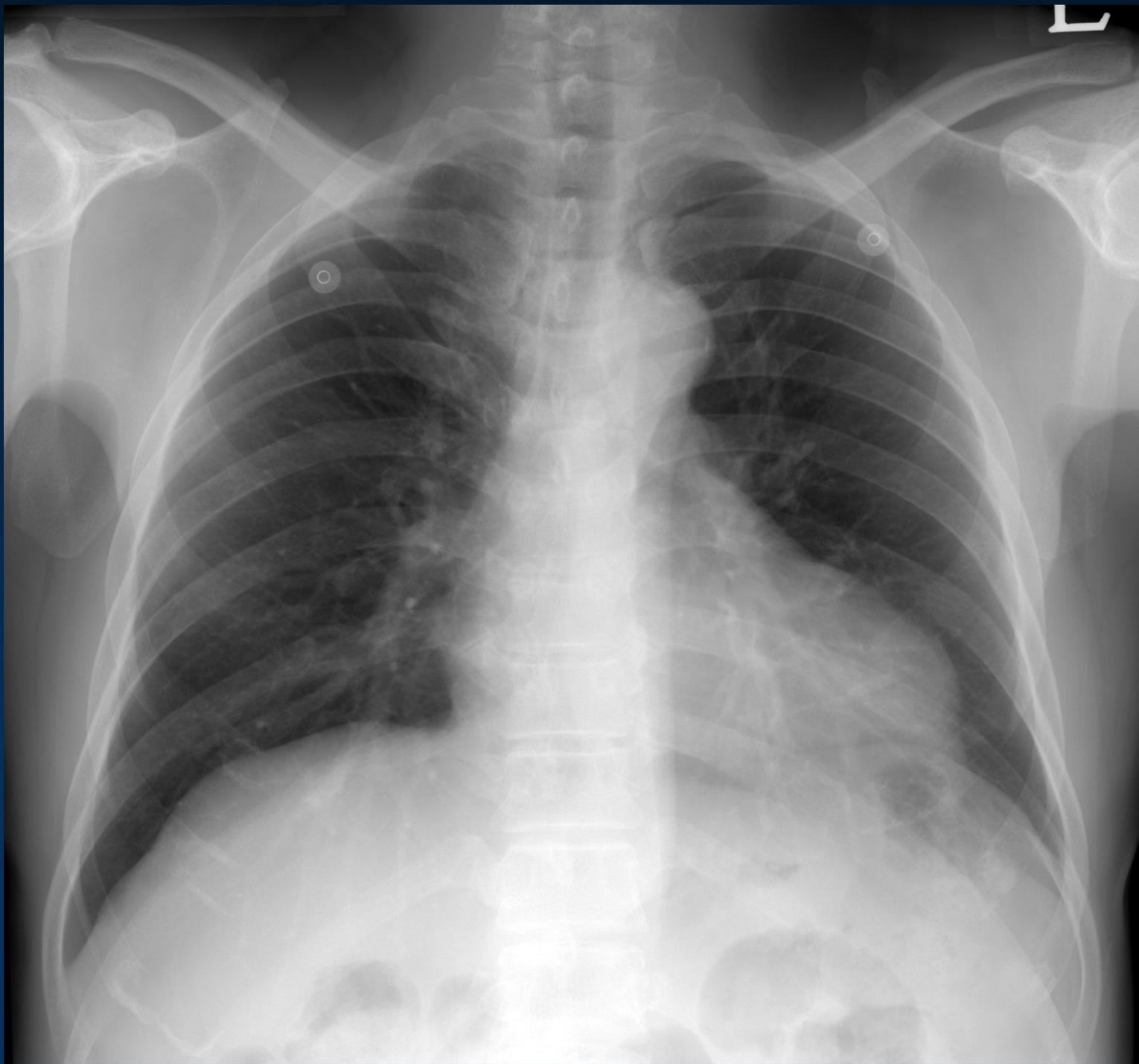


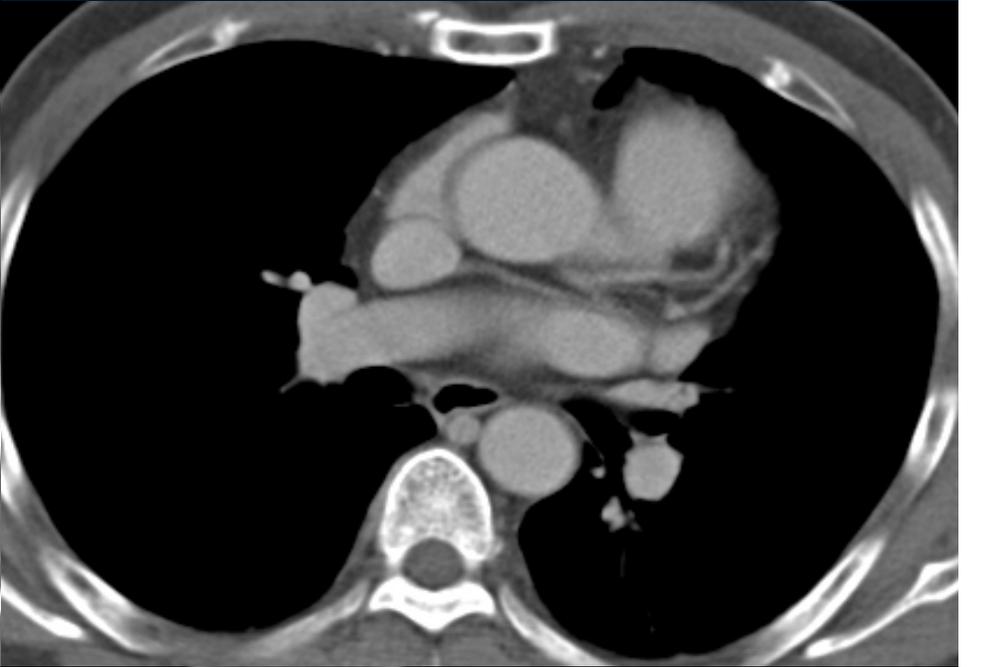
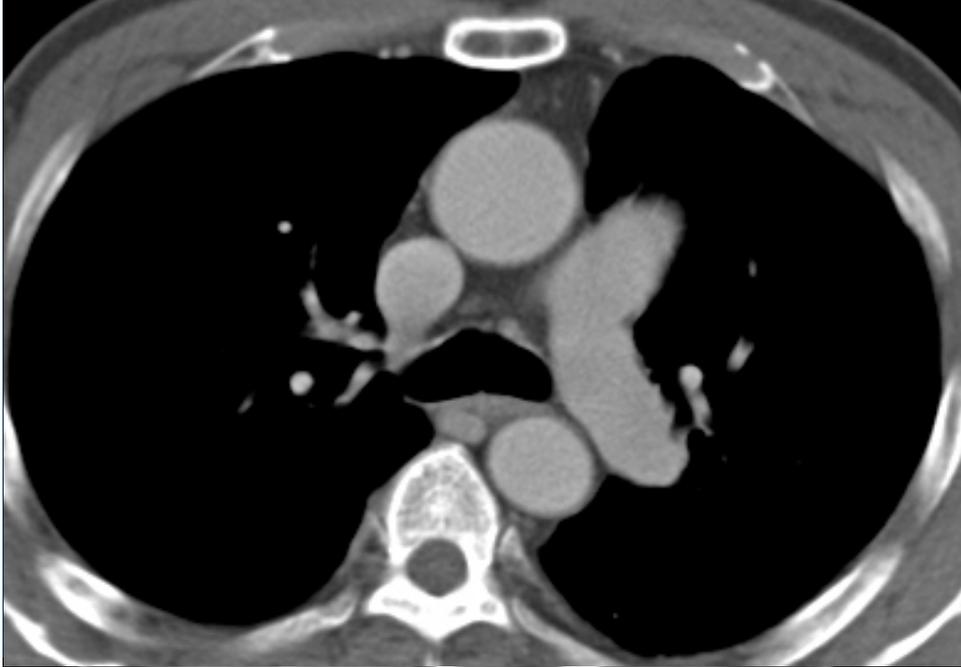
Case 1

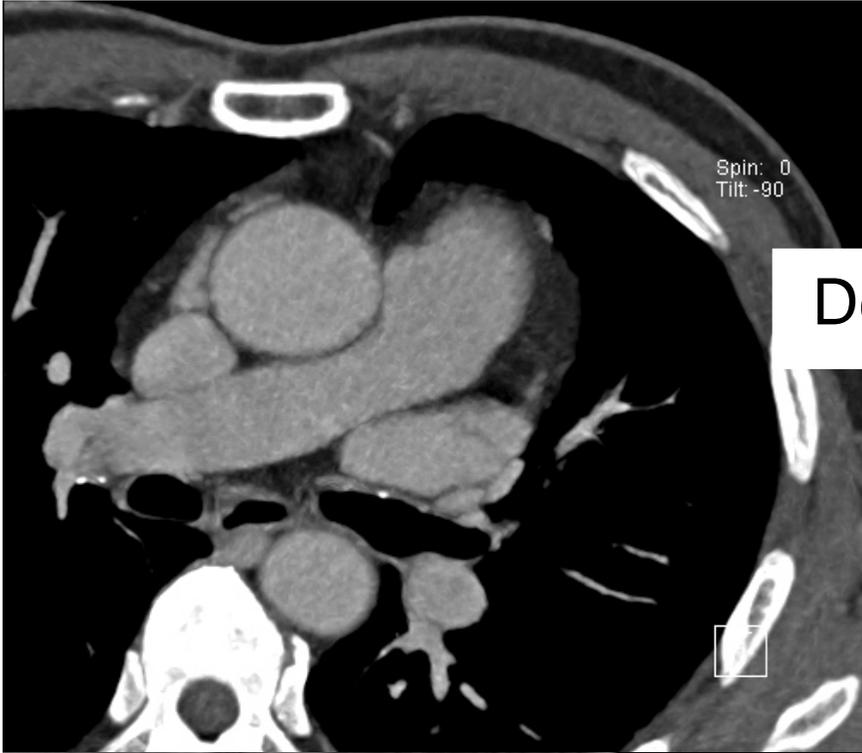
M/54

**C.C.: ECG Abnormality
(non-specific T change)**

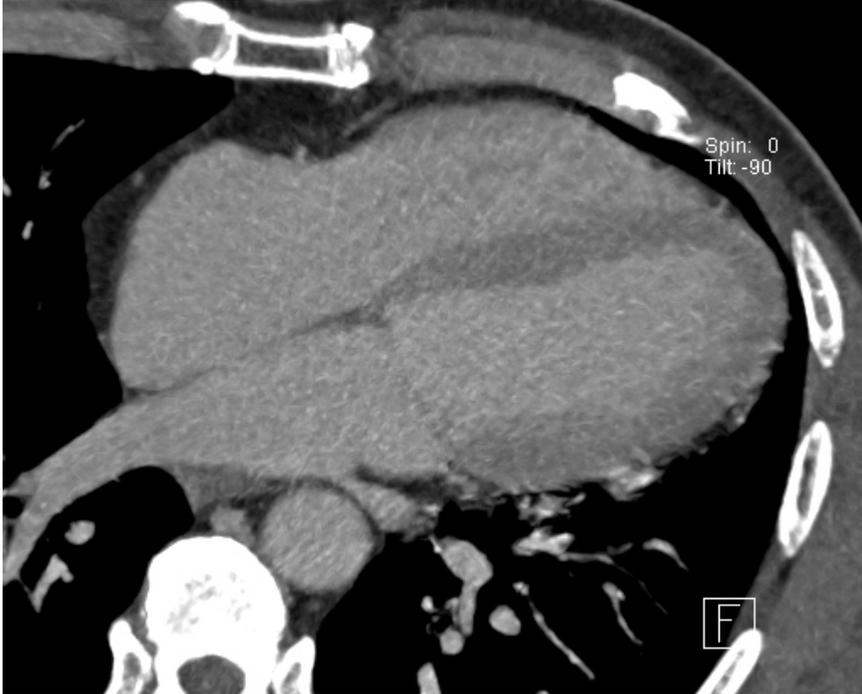
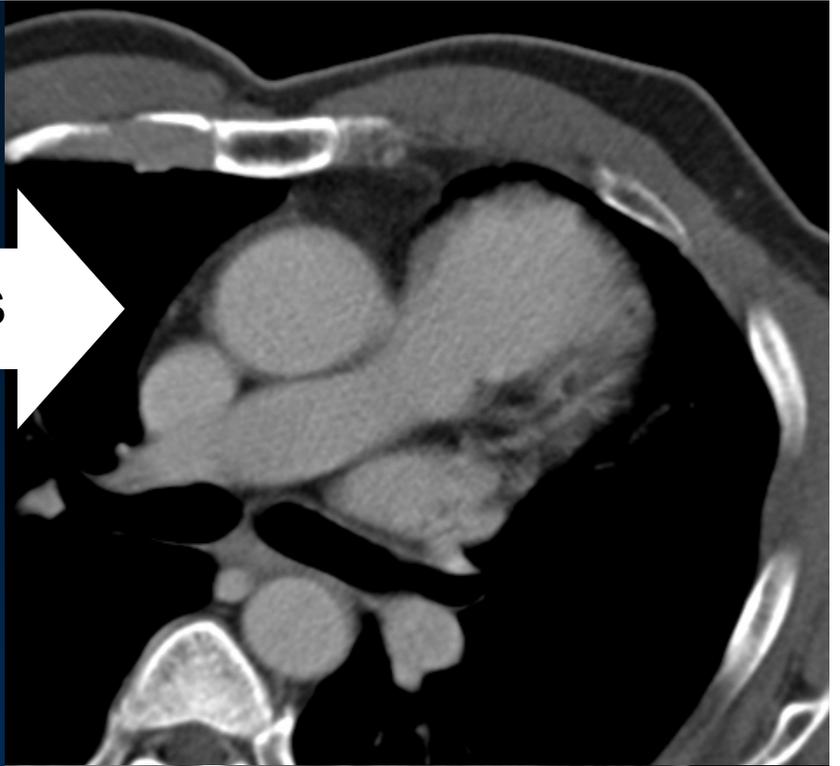
CAG at outside: normal







Decubitus



Diagnosis

**Complete Absence of
the Left Pericardium**

Congenital Absence of Pericardium

- **Mostly asymptomatic, chest pain, dyspnea, dizziness**
- **T-wave abnormality in young patient**
- **In partial defect, arrhythmia, angina, syncope, sudden death due to cardiac herniation**
- **Echocardiography**
 - **RV dilatation, paradoxical septal motion, due to hypermobility**
 - **RV, LV volume increase on left decubitus**

Radiologic Findings

- **Chest radiograph**
 - Radiolucent cleft between aortic knob and main pulmonary artery
 - Left and posterior rotation of cardiac apex
 - Flattened left cardiac silhouette
- **CT / MR**
 - Inability to identify fibrous layer of parietal pericardium
 - Displacement of heart into left hemithorax
 - Interposition of lung parenchyma between great vessels: Pathognomonic!

Embryology

- **Premature atrophy of left duct of Cuvier (common cardinal vein)**
- **Types**
 - Complete absence of left pericardium
 - Partial absence of left pericardium
 - Right-sided lesion, bilateral complete absence of the pericardium: rare
- **Associated anomaly (30%):**
 - PDA, ASD, TOF, mitral stenosis, bronchogenic cyst