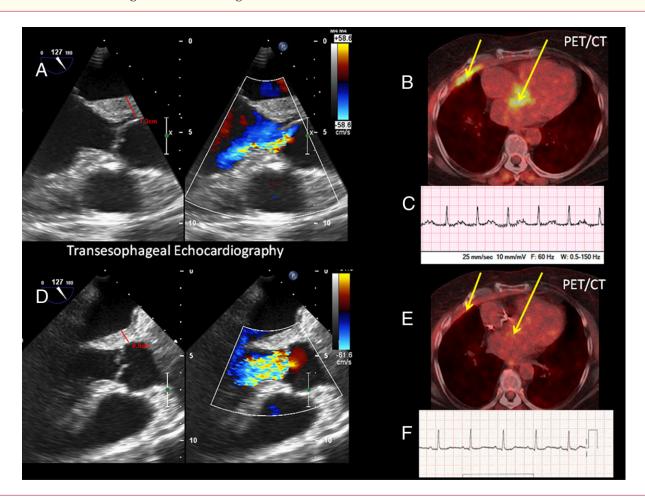
IMAGES IN CARDIOLOGY

Aortic Root Mass in Multifocal Fibrosclerosis

Eric T. McWilliams, MB, Katarzyna K. Dickinson, MB, Robert T. Gerber, MB, Vivek Raman, MB East Sussex and Brighton, United Kingdom



From the Conquest Hospital, Cardiology, East Sussex, United Kingdom Manuscript received June 27, 2011; revised manuscript received July 15, 2011, accepted July 19, 2011. 64-year-old woman presented with syncope and fever. She had prior breast carcinoma treated by high-dose radiotherapy. Fever, diastolic murmur, and first-degree AV block (C) suggested endocarditis with aortic root abscess. Blood cultures were negative. Further imaging revealed abnormal thickening of the aortic root (A, Online Videos 1 and 2). Positron emission tomography/computed tomography (PET/CT) showed intense 18F-fluorodeoxyglucose (FDG) uptake in the aortic root and right apical pleura (B, arrows). Temporal artery biopsy demonstrated normal histology; biopsy of the pleural mass showed fibrosis and some plasma cells. She was paced and received high-dose steroids: the PR interval had normalized (F), and there is no longer any abnormal FDG uptake (E). Repeat transesophageal echocardiography (D, Online Video 3) demonstrates less thickening but more marked aortic regurgitation.

Multifocal fibrosclerosis is a rare connective tissue disease characterized by the development of fibrotic pseudotumors. Radiation exposure is a possible risk factor. Therapy with steroids and immunosuppressive drugs has been used.