

Massive pericardial effusion in hodgkin's lymphoma

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Abstrak

Pericardial effusion is the presence of fluid in the pericardial cavity due to secretion from the visceral pericardium. It may be caused by virus, bacteria, fungi, tuberculosis, post-inflammation conditions, auto-reactive processes, neoplasm, renal failure, aortal dissection, and hyperthyroidism. Clinical symptoms may take the form of difficulty breathing, orthopnea, chest pain, dysphagia, hiccups, dysphonia, nausea, and bloated abdomen. Physical examination may portray paradoxal pulse, tachypnea, tachycardia, hypotension, and peripheral edema. Radiological findings include enlarged heart, and a heart configuration resembling a water jug. Electrocardiography may demonstrate low voltage, and flat T.

We report a case of a 25 year-old male who was admitted with a complaint of difficulty breathing since four days prior to hospitalization. The difficulty breathing was felt since eight months prior to admission. He had undergone aspiration of fluid from the heart, and received anti-tuberculous treatment. There was cough, white sputum, and night sweats. The patient also suffered from malignancy, and was scheduled for chemotherapy