RESEARCH ACTIVITIES
YASHODA HOSPITALS, HITEC CITY

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DEPARTMENT OF CLINICAL & INTERVENTIONAL PULMONOLOGY

Endobronchial ultrasound guided intracardiac needle aspiration (EBUS-ICNA)

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SUMMARY

Most cardiac tumours are secondary to metastasis from extracardiac tumours. Obtaining biopsy from intracardiac lesions, especially from the left heart, is challenging, and the conventionally used methods are invasive and involve significant risks such as arrhythmias, tamponade, valvular damage and tumour embolisation. Endobronchial ultrasound (EBUS) is a minimally invasive procedure used to biopsy lymph nodes or mass lesions adjacent to the airways. Its safety and usefulness have been well established. Use of EBUS has expanded to several novel indications over the last few years. Here we report a case of a young woman with suspected metastatic disease to the heart, in whom traditional methods of biopsy had failed to give a diagnosis. EBUS-guided transbronchial intracardiac needle aspiration was safely performed from the left atrial mass lesion to obtain tissue for histopathological diagnosis. A diagnosis of metastatic adenocarcinoma with tumour embolisation to the heart was established.

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