A 75-year-old female was emergently admitted for superior vena cava syndrome due to right atrial primary B-cell lymphoma occluding superior vena cava and sub-occluding the inferior one (Fig. 1). Right atrium reappeared at post-operative CT-scan (Fig. 2) after tumor excision and equine pericardium wall reconstruction. She is asymptomatic at 6 months.
Fig. 2. (A) Intraoperative final view of reconstruction with right atrial appendage sparing. (B) Postoperative coronal bi-dimensional CT-scan view. Right atrium (RA) is visualized after surgical reconstruction. SVC: superior vena cava; Ao: ascending aorta; PA: pulmonary artery; LV: left ventricle. (C) Postoperative 3D CT-scan reconstruction: right atrium (RA) filling is present in absence of more posterior anatomical structures visualization. Right ventricle (RV) reappeared. SVC: superior vena cava; Ao: ascending aorta; PA: pulmonary artery.