Arch Rheumatol 2021;36(x):i-iii
doi: 10.46497/ArchRheumatol.2021.8767

LETTER TO THE EDITOR

A clinical case of eosinophilic granulomatosis with polyangiitis manifestation with a tumor in the pericardium in combination with high titers of serum immunoglobulin G4

Yelyzaveta Yehudina[1], Svitlana Trypilka[2], Olena Dyadyk[3]

[1]Department of Rheumatology, Institute of Rheumatology, Kyiv, Ukraine
[2]Department of Rheumatology, Communal Non-Commercial Enterprise of Kharkiv Regional Council "Regional Clinical Hospital", Policlinic Department, Kharkiv, Ukraine
[3]Department of Pathologic and Topographic Anatomy, P.I. Shupyk National Medical Academy of Postgraduate Education, Kyiv, Ukraine

Eosinophilic granulomatosis with polyangiitis (EGPA) is a rare systemic disease which is histopathologically characterized by eosinophilic infiltration, extravascular granulomas and necrotizing vasculitis with predominantly small and medium vascular involvement.[1] An accurate diagnosis of EGPA is often difficult due to clinical manifestations similar or overlapping with chronic eosinophilic pneumonia, hypereosinophilic syndrome, other primary systemic vasculitis, and hyperimmunoglobulin G4 syndrome.[2]

A 25-year-old female patient presented to a rheumatologist with complaints of severe weakness, shortness of breath with mild physical exertion, palpitations, low-grade fever in the evening, tightness of the chest, and weight loss by 6 kg within the past four months. She reported that she felt herself ill for six months. Initial complains were shortness of breath, fever, and pressure pain behind the sternum. The patient consulted a cardiologist, and echocardiography revealed a neoplasm in the anterior mediastinum (Figure 1). The hypodense structure without clear contours, semicircular in the circumference of the non-coronary and left coronary sinus of the aorta, spreading and circularly enveloping the mouth of the left coronary artery, causing a narrowing of the lumen up to 70 to 80%

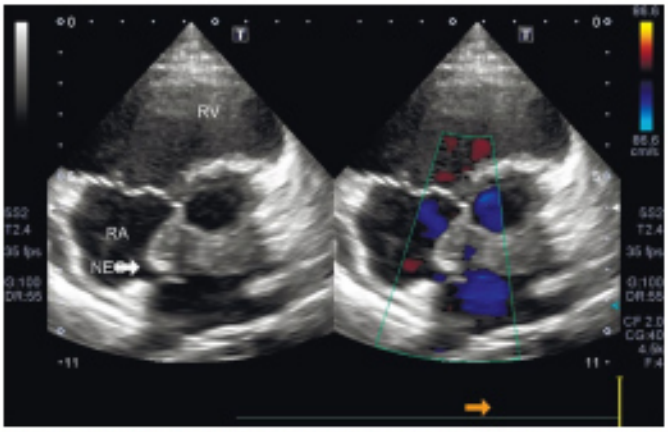

Figure 1. An echocardiographic image showing neoplasm in the anterior mediastinum.
NEO: Neoplasm; RV: Right ventricle; RA: Right atrium.

Received: February 09, 2021 **Accepted:** March 22, 2021 **Published online:** June 24, 2021

Correspondence: Yelyzaveta Yehudina, MD, PhD. Department of Rheumatology, Institute of Rheumatology, 02081 Kyiv, Ukraine.
Tel: +380990595475 e-mail: elizavetaegudina@gmail.com

Citation:
Yehudina Y, Trypilka S, Dyadyk O. A clinical case of eosinophilic granulomatosis with polyangiitis manifestation with a tumor in the pericardium in combination with high titers of serum immunoglobulin G4. Arch Rheumatol 2021;36(x):i-iii.