

ESSENTIAL IMAGE / *Cardiac imaging*

## Lipomatous hypertrophy of interatrial septum causing hot spot on $^{18}\text{F}$ FDG PET/CT



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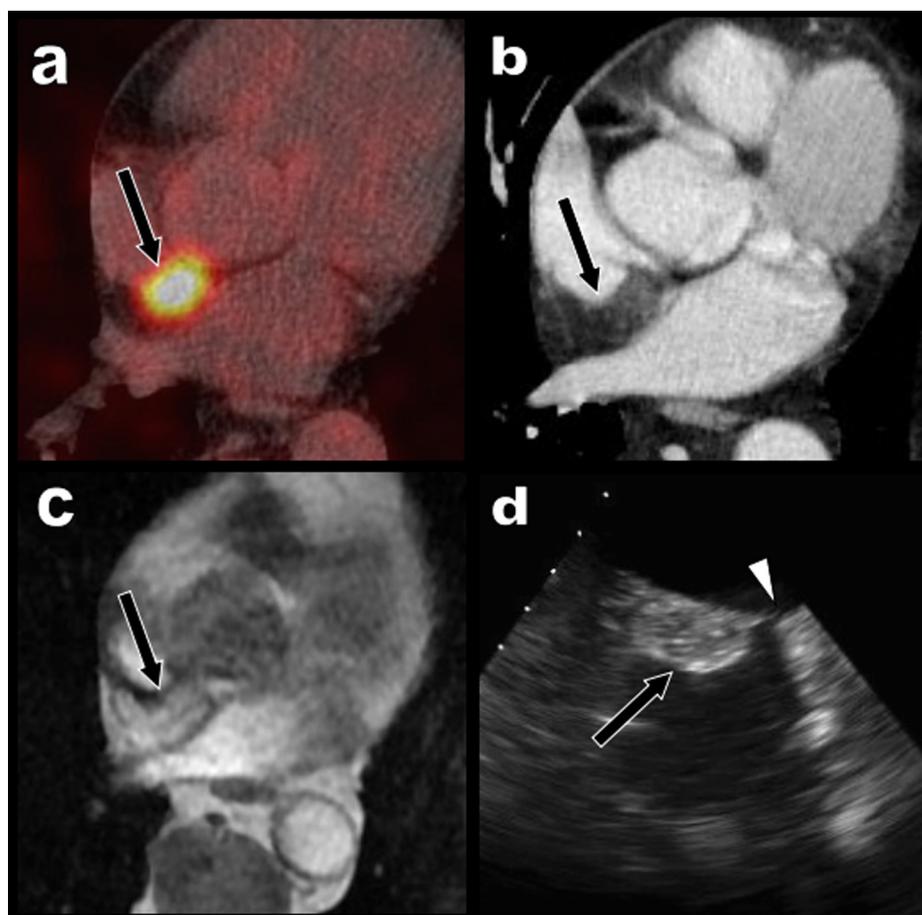
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A 78-year-old man had 18 F-Fluorodeoxyglucose ( $^{18}\text{F}$ FDG) positron emission tomography/computed tomography (PET/CT) examination in the diagnostic workup of autoimmune pancreatitis.  $^{18}\text{F}$ FDG PET/CT revealed intense  $^{18}\text{F}$ FDG uptake (SUV 11.8) of the interatrial septum (Fig. 1a). CT (Fig. 1b), magnetic resonance imaging (Fig. 1c) and transesophageal echocardiography (Fig. 1d) confirmed typical lipomatous hypertrophy of the interatrial septum. Lipomatous hypertrophy of the interatrial septum is an

uncommon, benign and mostly clinically non-significant cardiac condition, which is characterized by dumbbell-like mass of fatty infiltration of the interatrial septum with respect of the fossa ovalis. Lipomatous hypertrophy of the interatrial septum has no distinct capsule. The fat contains variable amounts of brown fat that metabolizes  $^{18}\text{F}$ FDG, resulting in variable degrees of  $^{18}\text{F}$ FDG uptake [1,2]. Awareness of this benign cause of atrial hot spot is essential to avoid unnecessary and invasive further investigations.

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**Figure 1.** A 78-year-old man with lipomatous hypertrophy of interatrial septum: a:  $^{18}\text{F}$ FDG PET/CT image in the transverse plane shows intense uptake of  $^{18}\text{F}$ FDG (arrow); b: CT image in the transverse plane reveals hypoattenuating area corresponding to hot spot on  $^{18}\text{F}$ FDG PET/CT image; c: T1-weighted magnetic resonance (MR) image in the transverse plane shows hyperintense area (arrow); d: transesophageal ultrasound shows hyperechogenic area (arrow), thus confirming lipomatous hypertrophy of interatrial septum.

### Disclosure of interest

The authors declare that they have no competing interest.

### References

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- [2] Sawant AC, Srivatsa SS. Multi-modality imaging for accurate diagnosis of lipomatous hypertrophy of interatrial septum in a patient with lung cancer and increased FDG uptake on PET. *BMJ Case Rep* 2012, <http://dx.doi.org/10.1136/bcr.03.2012.6074>.