

Abstract No. **19**

Category: **Heart Failure and Cardiomyopathies**

Title: **Severe Pericardial Effusion, What are the Most Frequent Etiologies?**

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Abstract:

Background: Pericardial effusion is an entity that entails significant morbidity and mortality. Usually is insufficiently studied to establish a definitive diagnosis of its etiology. There have been no local studies describing the characteristics of a sample with severe pericardial effusion and the underlying etiologies.

Methods: A cross-sectional study was conducted from the records of a high complexity hospital between 2006 and 2018. A descriptive analysis was carried out with relative and absolute frequencies for the studied variables.

Results: We analyzed 48 patients with severe pericardial effusion who underwent echocardiography and drainage. 50% of the patients were men. The main indication for drainage was etiological search (58%), followed by cardiac hemodynamic compromise (23%) and refractoriness to medical treatment (19%). Regarding the etiologies, non-infectious were the most prevalent (66.7%), this group included neoplasms, iatrogenic or postoperative, chronic kidney disease, heart failure and autoimmune diseases. In 20.8% of the cases, an accurate underlying cause could not be established and, therefore, were defined as idiopathic pericardial effusions or idiopathic pericarditis. Infectious etiologies were the least prevalent group (12.5%) with a significant number of cases being pericardial tuberculosis (83.3%).

Conclusion: The non-infectious causes were the most common, especially those related to traumatic or postsurgical events, possibly due to their easy clinical suspicion. Likewise, our study confirms the increasing cancer incidence worldwide and nationally. Within the infectious causes, pericardial tuberculosis was the most prevalent, for being an endemic country and a hospital that is considered a reference center where less common and more severe cases of tuberculosis are admitted. Although the idiopathic causes were lower than reported in other series, they remain a representative number of patients in whom the cause could not be defined.