2016 ASE State of the Art Echocardiography Course | Tucson, AZ

Carcinoid

Sunday, February 14, 2016 | 7:00 - 7:15 PM | 15 min



NYU SCHOOL OF MEDICINE



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Disclosures

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Speakers Bureau Philips, Medtronic

NYU Division of Cardiology

CARCINOID TUMOR



Siegfried Oberndorfer (1876 – 1944) German pathologist

In 1907, Siegfried Oberndorfer coined the term Karzinoide (based on $\kappa a \rho \kappa \iota \nu \dot{\omega} \delta \eta \varsigma$, later anglicized as carcinoid)

Karzinoide Tumoren des Dünndarmes. [Carcinoid tumors of the small intestine] *Frankfurter Zeitschrift für Pathologie* **1907**;1:426-429.

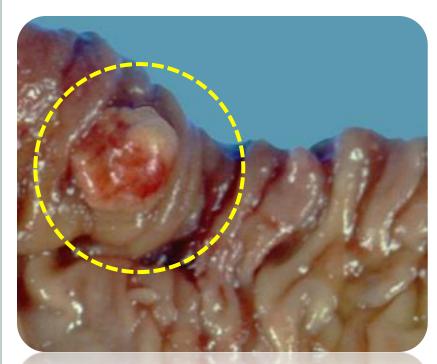
Carcinoid = 'carcinoma like'

Histologically, a malignant tumor...

... but clinically often behaves like a benign nonmetastatic tumor

CARCINOID TUMOR VS. CARCINOID HEART DISEASE What's the difference?

CARCINOID TUMOR



Carcinoid of the small intestine

- **Malignant tumor** of neuroendocrine cells in the gut or bronchial tree
- Slow growing and occasionally metastatic
- Secretes vasoactive substances & hormones including serotonin (5-HT) resulting in carcinoid syndrome:
 - Facial flushing
 - Diarrhea
 - Carcinoid heart disease

What portion of the heart gets involved depends on the primary tumor's location:

- **Intestinal** carcinoid >> Preferential **RIGHT** heart involvement
- **Bronchial** carcinoid >> Preferential **LEFT** heart involvement

CARCINOID HEART DISEASE

Carcinoid heart disease is **NOT** a cardiac malignancy.



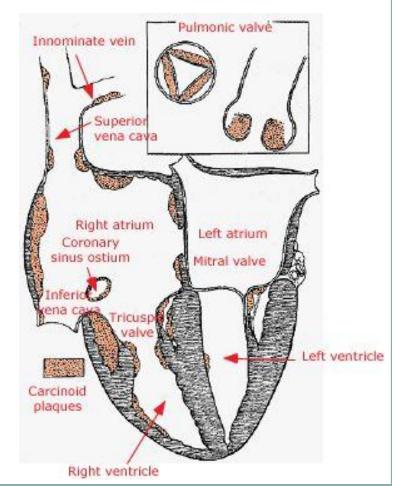
Carcinoid heart disease is a **paraneoplastic syndrome** caused by tumor-derived vasoactive substances.

Paraneoplastic manifestation of a carcinoid tumor

- Mural plaques
- Valvulitis >> Stenosis + Regurgitation

Because intestinal carcinoid are more common than bronchial ones, carcinoid disease involves primarily the **right heart.**

Carcinoid heart disease is often associated with **liver metastases** of an intestinal carcinoid.



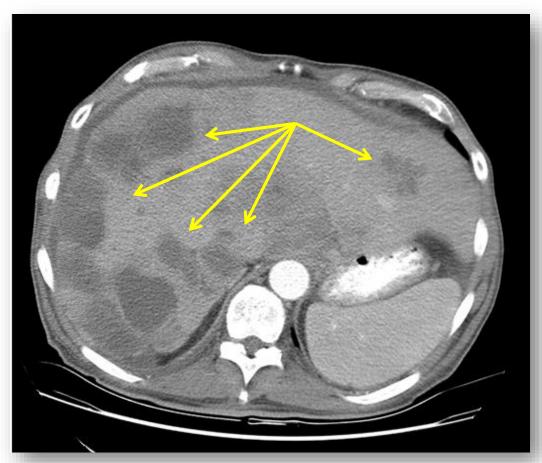
CARCINOID HEART DISEASE Case #1

CLINICAL PRESENTATION

56-year-old previously healthy man

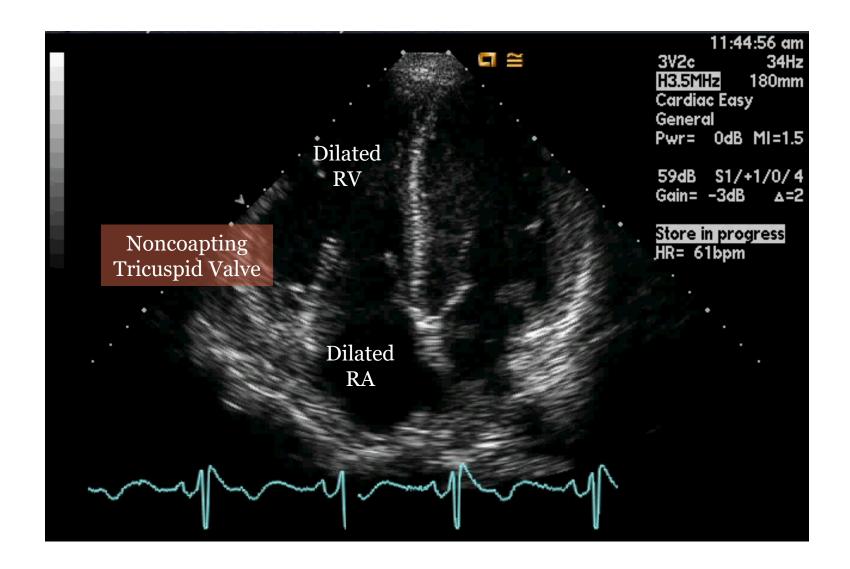
- Presented with right upper quadrant pain
- Referred for abdominal CT

ABDOMINAL CT

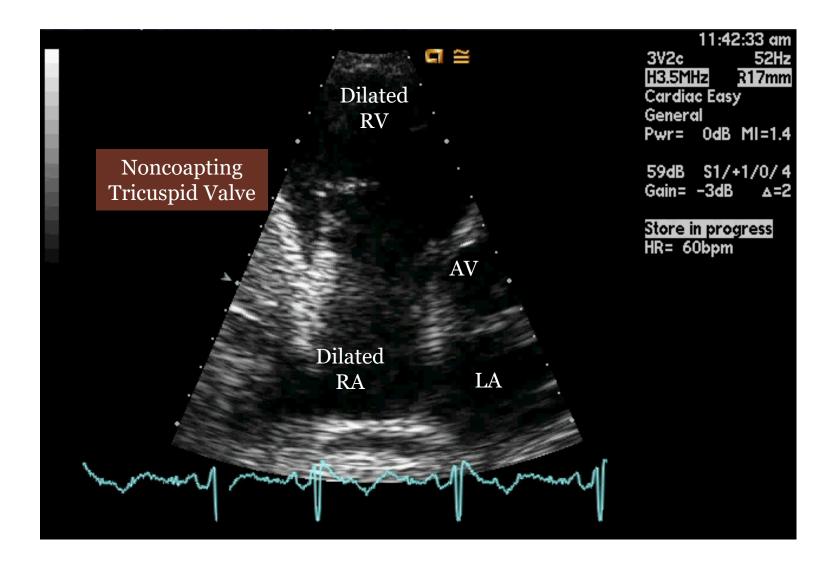


Multiple liver metastases of an unknown primary tumor

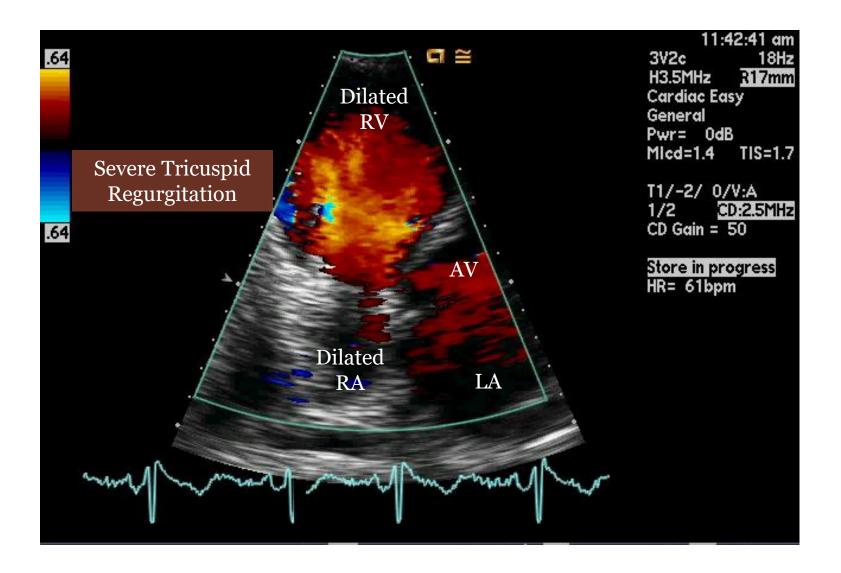
TRANSTHORACIC ECHOCARDIOGRAM | APICAL 4-CHAMBER VIEW



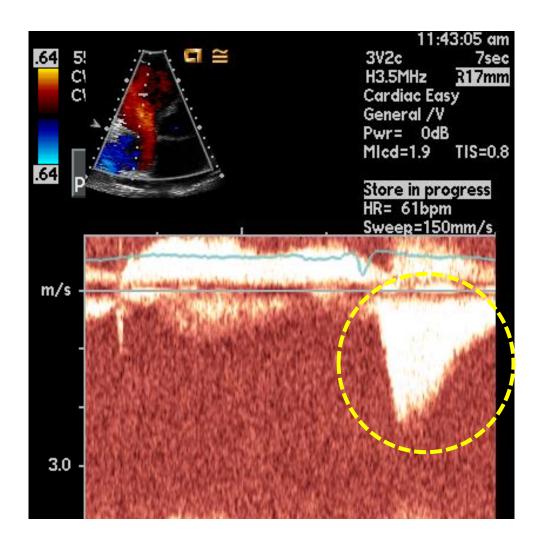
TRANSTHORACIC ECHOCARDIOGRAM | PARASTERNAL SHORT-AXIS VIEW



TRANSTHORACIC ECHOCARDIOGRAM | PARASTERNAL SHORT-AXIS VIEW

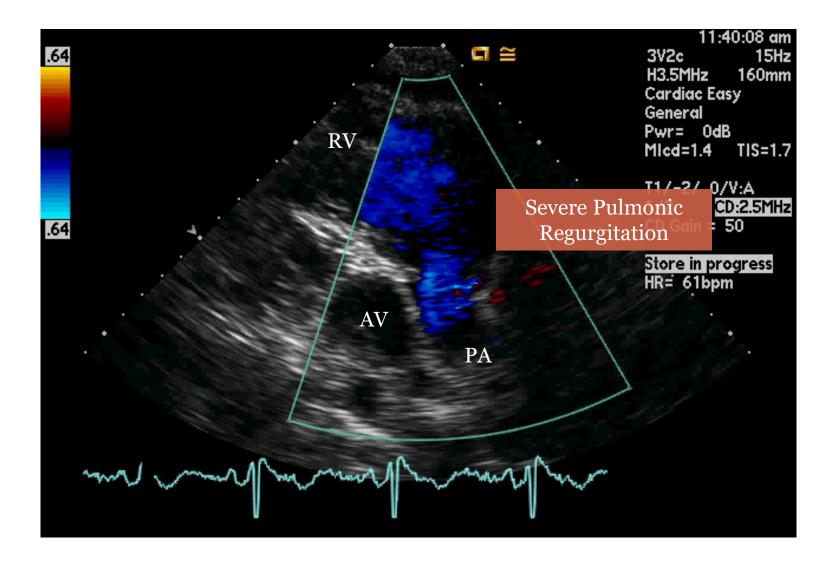


TRANSTHORACIC ECHOCARDIOGRAM | CW DOPPLER OF TRICUSPID VALVE

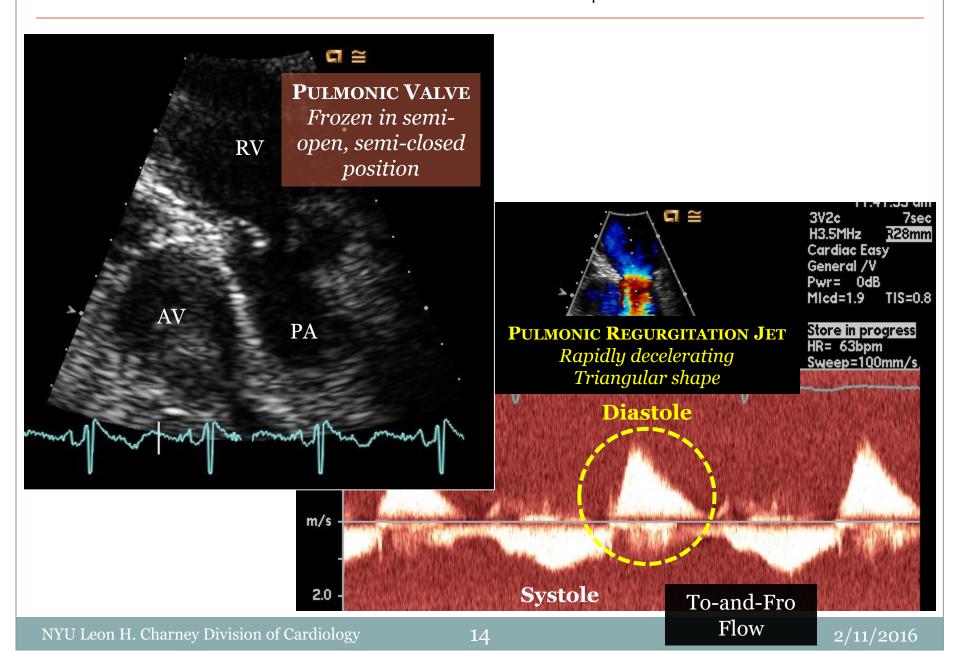


TR JETLow velocity
Triangular shape

TRANSTHORACIC ECHOCARDIOGRAM | PULMONIC VALVE



TRANSTHORACIC ECHOCARDIOGRAM | PULMONIC VALVE



CARCINOID HEART DISEASE Case #2

CLINICAL PRESENTATION

71-year-old female with 8-year history of metastatic carcinoid

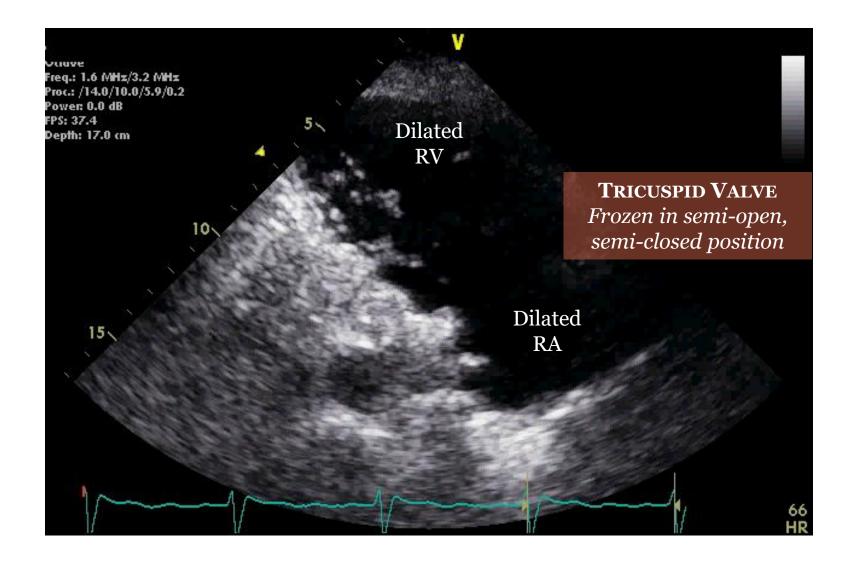
- Severe abdominal pain & increased diarrhea x 2 weeks
- On **somatostatin** analog for many years
- For the last 3 years, she has been taking **tincture of opium** for her diarrhea with relatively good control;
 however, she stopped 4 days ago because she developed
 severe right upper quadrant pain when she took it.
- Since then, she has been taking at least 12 **Lomotil** antidiarrheal pills with poor diarrhea control.

OCTREOTIDE

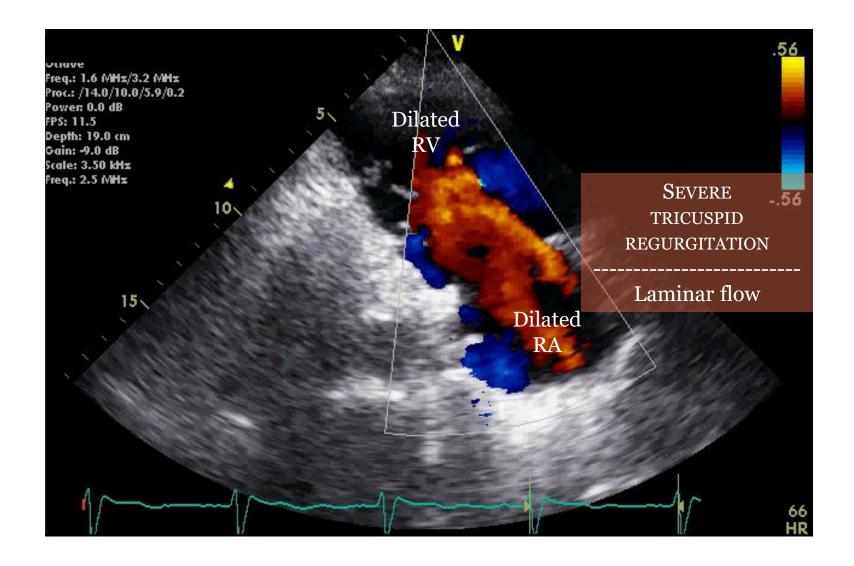
Somatostatin analog used to counteract effects of carcinoid-derived hormones

HO

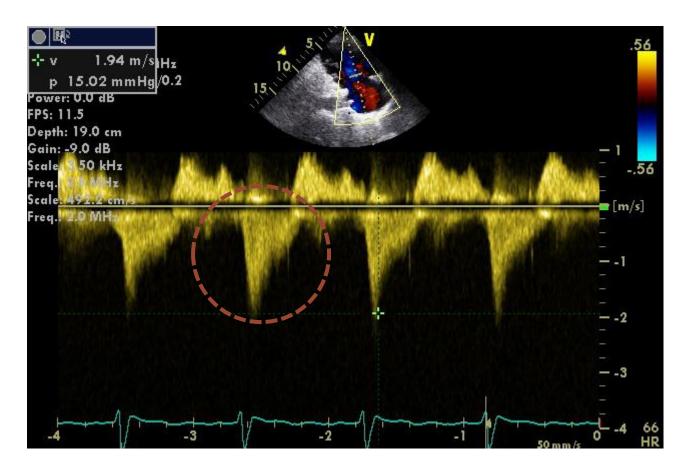
TRANSTHORACIC ECHOCARDIOGRAM | RV INFLOW VIEW



TRANSTHORACIC ECHOCARDIOGRAM | RV INFLOW VIEW



TRANSTHORACIC ECHOCARDIOGRAM | CW DOPPLER OF TRICUSPID VALVE



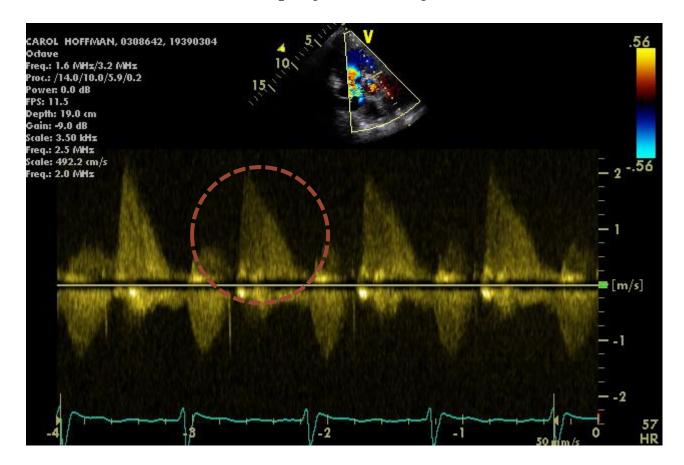
TRICUSPID REGURGITATION JET

Low velocity Triangular shape

TRANSTHORACIC ECHOCARDIOGRAM | CW DOPPLER OF PULMONIC VALVE

PULMONIC REGURGITATION JET

Rapidly decelerating



CARCINOID HEART DISEASE Case #3

CLINICAL PRESENTATION

57-year-old female with shortness of breath over the past 6 weeks.

- Previously unlimited exercise tolerance
- Progressive bilateral leg edema, increasing abdominal girth and loose bowel movement.
- Recently noticed intermittent **flushing** and **shivering** without fever



OCTREOTIDE ABDOMINAL CT SCAN

Multiple foci of uptake within the liver and in a calcified mesenteric mass compatible with **octreotide avid tumors** such as **carcinoid**.

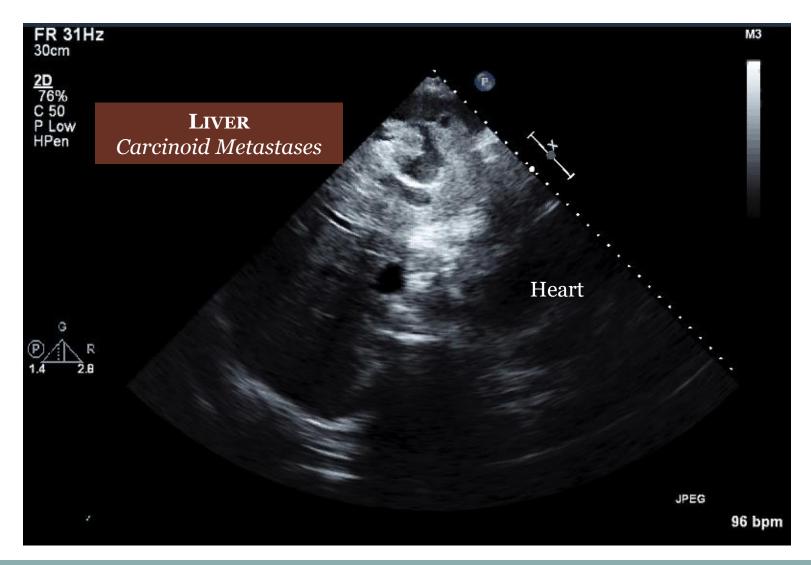
24-HOUR URINE TEST

Test Name	Value	Abnormal Flag	Range	Unit
Time (Hours)	24			
Total Volume	2450			
5-HIAA	79.2			mg/L
5-HIAA, mg/day	194	Н	0-15	mg/d
5-HIAA Urine, mg/g CRT	189	Н	0-14	mg/g
5HIAA Interpretation	See Note			
Urine Creatinine	42			mg/dL
Creatinine mg/day	1029		500-1400	mg/d

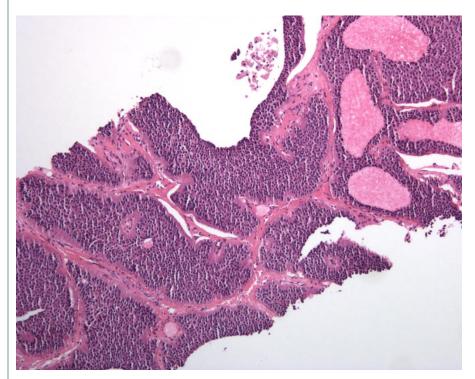
Increased urinary excretion of serotonin metabolites, consistent with **carcinoid syndrome**.

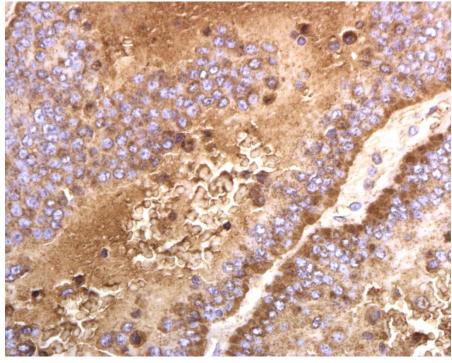
TRANSTHORACIC ECHOCARDIOGRAM

TTE showed **severe tricuspid** and **pulmonic regurgitation**... and something else in subcostal view



LIVER BIOPSY





CARCINOID TUMOR

Metastatic well differentiated
neuroendocrine tumor

CARCINOID TUMOR

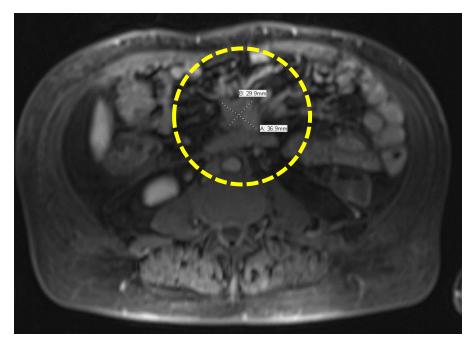
Positive staining for **chromagranin**consistent with carcinoid

CARCINOID HEART DISEASE Case #4

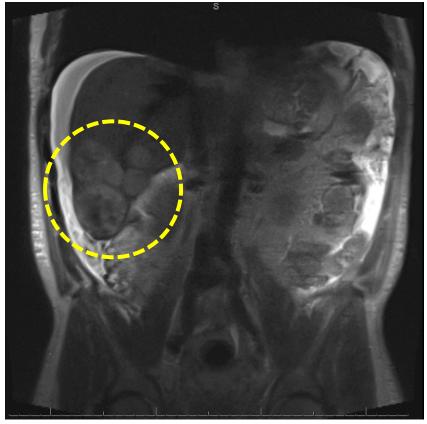
CLINICAL PRESENTATION

64-year-old men with recent weight loss and bilateral lower extremity edema

- A year ago, he noticed some flushing and rosy appearance to his cheeks
- Six months ago he started having diarrhea
- Abdominal MRI
 - Mesenteric soft tissue mass
 - Multiple hepatic metastases
- Liver biopsy
 - Carcinoid tumor

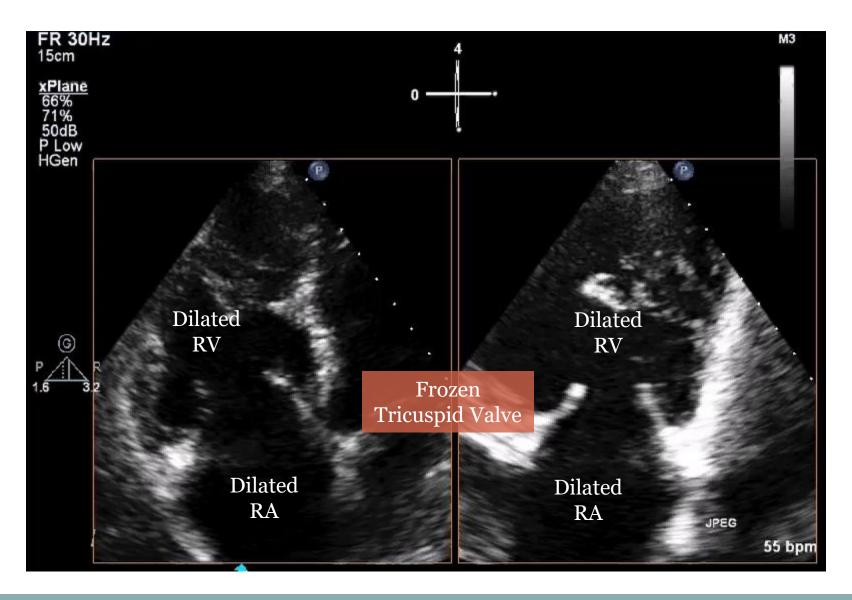


MRI | MESENTERIC CARCINOID

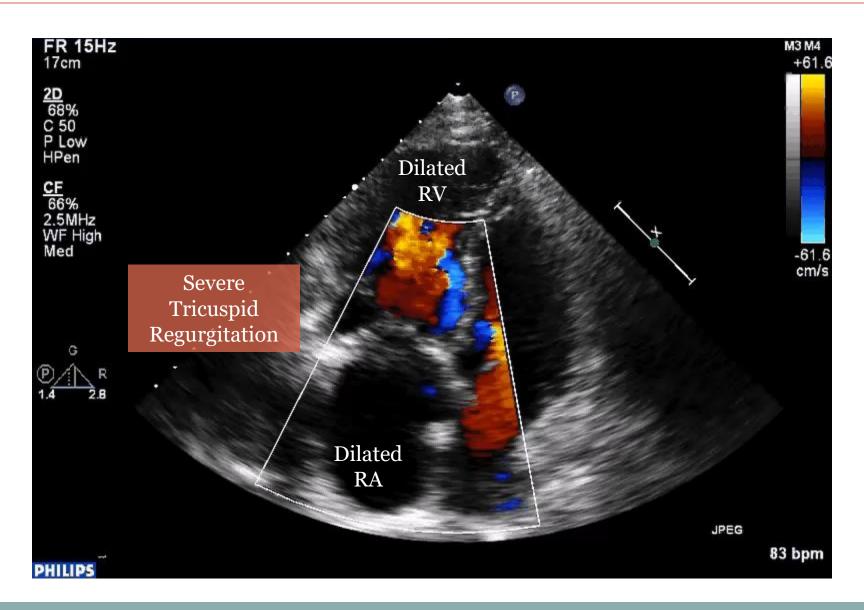


MRI | INNUMERABLE LIVER METASTASES

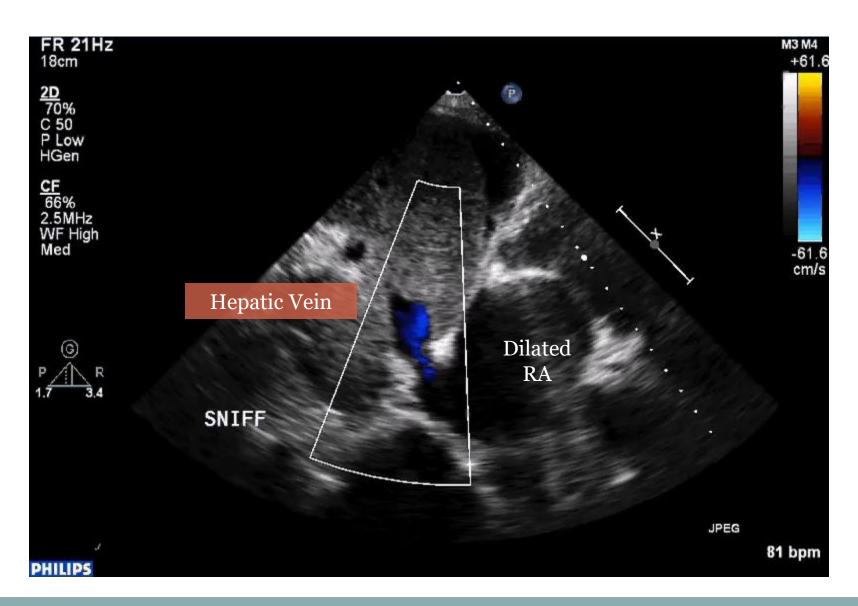
3D TRANSTHORACIC ECHOCARDIOGRAM | BIPLANE VIEW



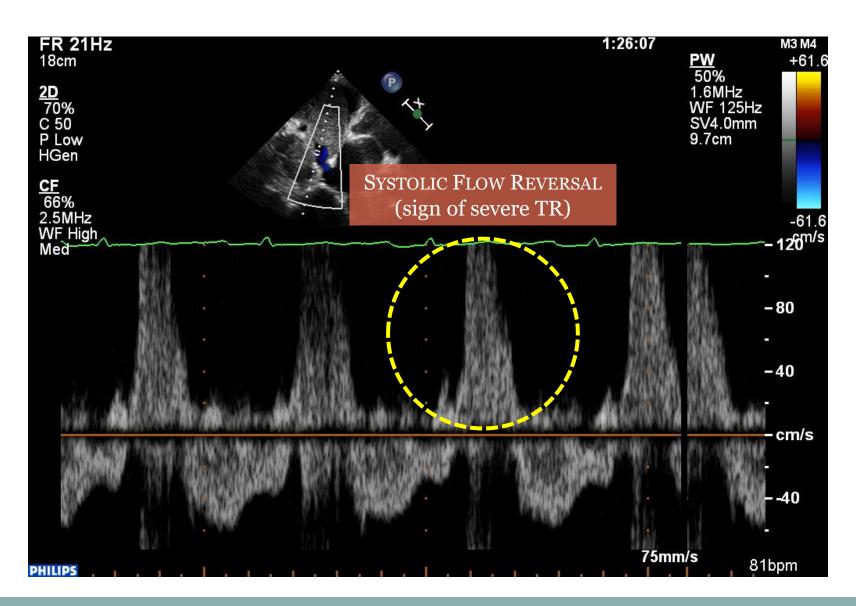
TRANSTHORACIC ECHOCARDIOGRAM | APICAL 4-CHAMBER VIEW



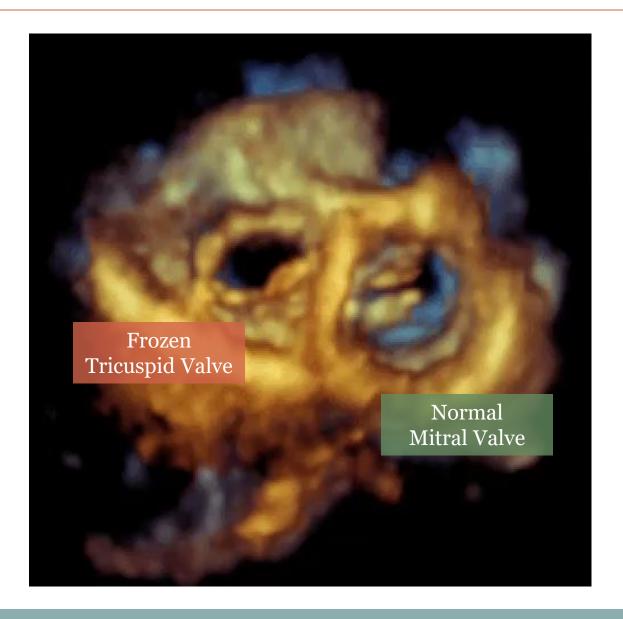
TRANSTHORACIC ECHOCARDIOGRAM | SUBCOSTAL VIEW



TRANSTHORACIC ECHOCARDIOGRAM | HEPATIC VEIN

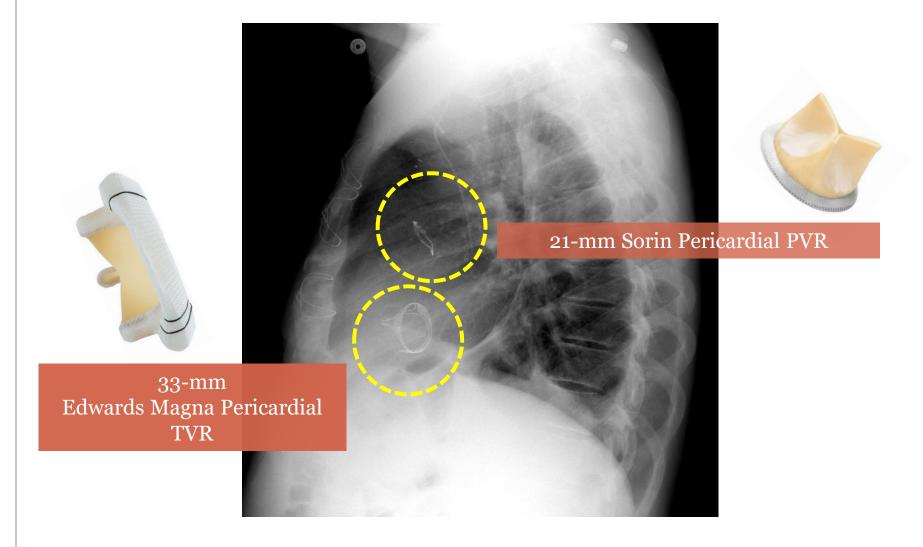


3D TRANSTHORACIC ECHOCARDIOGRAM | LV PERSPECTIVE

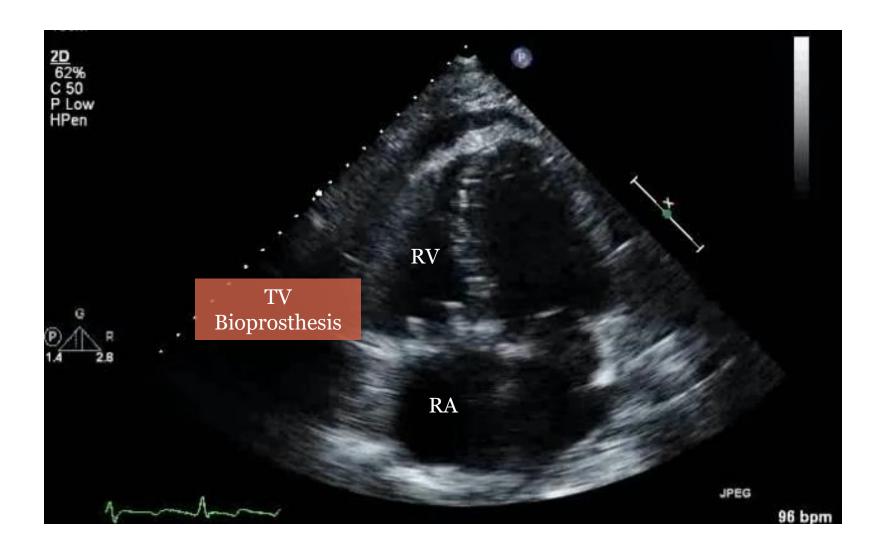


SURGERY FOR CARCINOID VALVE DISEASE

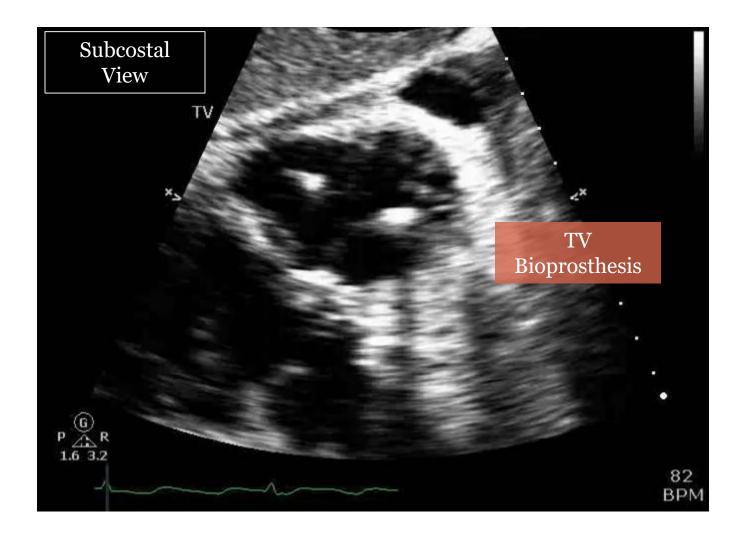
Underwent surgical replacement of both tricuspid & pulmonic valve



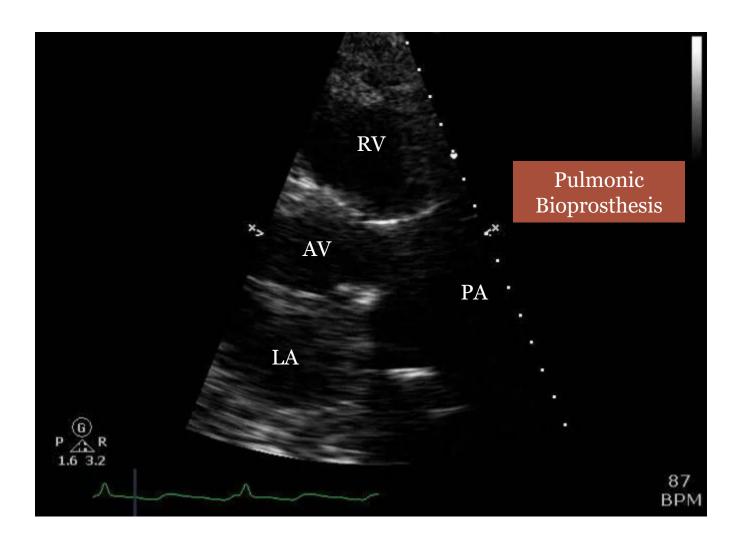
TRANSTHORACIC ECHOCARDIOGRAM | TRICUSPID BIOPROSTHESIS



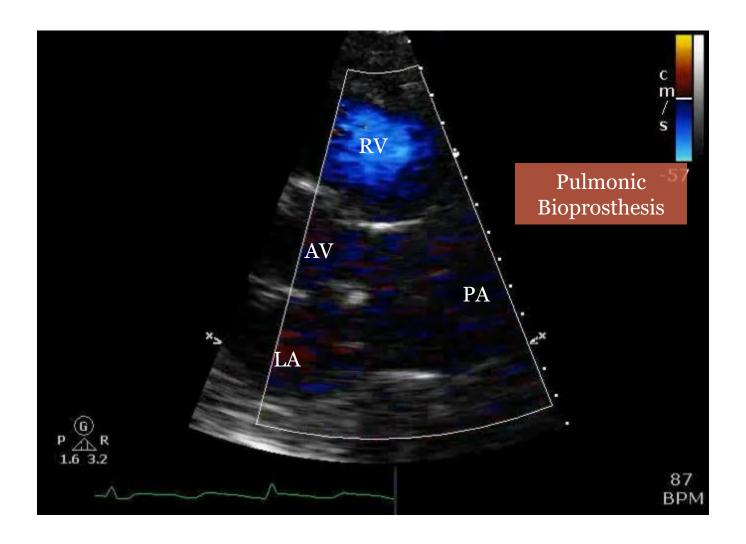
TRANSTHORACIC ECHOCARDIOGRAM | TRICUSPID BIOPROSTHESIS



TRANSTHORACIC ECHOCARDIOGRAM | PULMONIC BIOPROSTHESIS



TRANSTHORACIC ECHOCARDIOGRAM | PULMONIC BIOPROSTHESIS



CASE #4 EPILOGUE

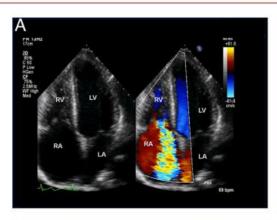
At present, 4 years after TVR & PVR, patient is doing well on octreotide.

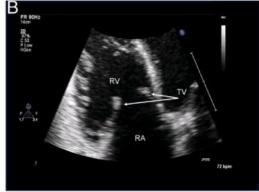
CARCINOID HEART DISEASE Case #5

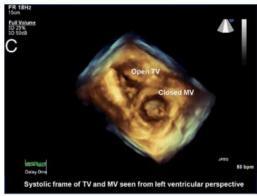
IMAGES IN CARDIOLOGY

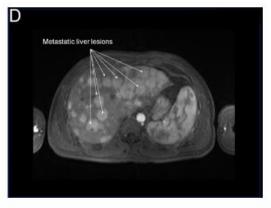
Carcinoid Heart Disease

Susie N. Hong, MD, Muhamed Saric, MD, PhD, Itzhak Kronzon, MD New York, New York









J. Am. Coll. Cardiol. 2010;55;1996.

Thank you





New York University Medical Center