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# **Causes of pericardial disease**

# Idiopathic (presumed to be viral, postviral, or immune-mediated)

In most case series, the majority of patients are not found to have an identifiable cause of pericardial disease. Frequently such cases are presumed to have a viral or autoimmune etiology.

#### **Infectious**

Viral – Coxsackievirus, echovirus, adenovirus, Epstein-Barr virus, cytomegalovirus, influenza, varicella, rubella, HIV, hepatitis B, mumps, parvovirus B19, vaccina (smallpox vaccine), severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)

Bacterial - Mycobacterium tuberculosis (most common cause in countries where tuberculosis is endemic), Staphylococcus, Streptococcus, Haemophilus, Neisseria (N. gonorrhoeae or N. meningitidis), Chlamydia (C. psittaci or C. trachomatis), Legionella, Salmonella, Borrelia burgdorferi (the cause of Lyme disease), Mycoplasma, Actinomyces, Nocardia, Tropheryma whippelii, Treponema, Rickettsia

Fungal – Histoplasma, Aspergillus, Blastomyces, Coccidioides, Candida

Parasitic – Echinococcus, amebic, Toxoplasma

Infective endocarditis with valve ring abscess

### **Noninfectious**

# **Autoimmune and autoinflammatory**

Systemic inflammatory diseases, especially lupus, rheumatoid arthritis, scleroderma, Sjögren syndrome, vasculitis, mixed connective disease

Autoinflammatory diseases (especially familial Mediterranean fever and tumor necrosis factor associated periodic syndrome [TRAPS], IgG4-related disease)

Postcardiac injury syndromes (immune-mediated after cardiac trauma in predisposed individuals)

Other - Granulomatosis with polyangiitis (Wegener), polyarteritis nodosa, sarcoidosis, inflammatory bowel disease (Crohn, ulcerative colitis), Whipple, giant cell arteritis, Behçet syndrome, rheumatic fever

### Neoplasm

Metastatic - Lung or breast cancer, Hodgkin disease, leukemia, melanoma

Primary – Rhabdomyosarcoma, teratoma, fibroma, lipoma, leiomyoma, angioma

Paraneoplastic

### **Cardiac**

Early infarction pericarditis

Late postcardiac injury syndrome (Dressler syndrome), also seen in other settings (eg, post-myocardial infarction and post-cardiac surgery)

Myocarditis

Dissecting aortic aneurysm

#### **Trauma**

Blunt

## Penetrating

Iatrogenic – Catheter and pacemaker perforations, cardiopulmonary resuscitation, post-thoracic surgery

### Metabolic

Hypothyroidism - Primarily pericardial effusion

Uremia

Ovarian hyperstimulation syndrome

### Radiation

# Drugs (rare)

Procainamide, isoniazid, or hydralazine as part of drug-induced lupus

Other – Cromolyn sodium, dantrolene, methysergide, anticoagulants, thrombolytics, phenytoin, penicillin, phenylbutazone, doxorubicin

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- 3. Imazio M. Contemporary management of pericardial diseases. Curr Opin Cardiol 2012; 27:308.

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