Cardiac tumors are rarely symptomatic and highlighted in the fetus when the size and position do not interfere with intracardiac hemodynamics. Objectives. To present four cases of cardiac tumors, confirmed by Doppler echocardiography (ECHO) performed in the first 14 days postnatal, 2 of which were already highlighted by fetal echocardiography. Cases presentation. Fetal echocardiography showed 3 and respectively 4 intracardiac mass, well circumscribed, 1 cm since birth with gaping cranial sutures and recurrent cerebral convulsions. Brain ultrasound demonstrated distinctive ventriculomegaly with multiple intraventricular filaments. Liquor findings revealed elevated protein and positive toxoplasmosis PCR. Serologically toxoplasmosis antibodies showed positive as well. Treatment was commenced with pyrimethamine, sulfadiazine and folin acid. Ophthalmological examination showed microphthalmus and retinal scars; NMR reveals multiple necrosis of basal ganglia and cerebellum. Multiple neurosurgical interventions were indispensable due to progressive intraventricular filament formation and subdural hygroma. Furthermore, severe thrombosis of the vena cava superior and the subclavian veins developed due to extensive clotting activation. Catheter intervention to achieve recanalization was performed with subsequent enoxaparin therapy. After development of sinus thrombosis and progressive intracranial haemorrhage intensive care treatment was limited. The baby deceased after 28 days of treatment.

Discussion Our case demonstrates that though maternal screening is available and despite of existing treatment options severe courses of the disease are still possible. In case of excessive increase in head circumference an elaborate search for intrauterine infections should be mandatory.
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