Cardiac hydatid cyst is a rare clinical entity seen in endemic areas, accounting for only 0.5% to 2% of all cases of echinococcosis. It is commonly found in the left ventricle (60%), but may be located in the right ventricle (10%), pericardium (7%), pulmonary artery (6%), and left atrial appendage (6%). Involvement of the interventricular septum is rare. Angiosarcomas have a striking predilection for the right atrium and are characterized by vascular channels.

A 76-year-old man was admitted with shortness of breath of a six-month history. Echocardiographic examination showed multiple echolucent areas masquerading as a solid mass with vascular channels. Two-dimensional echocardiography (Fig. A) and magnetic resonance imaging (MRI) (Fig. B) revealed a hydatid cyst, 54 x 66 mm in size, located near the right heart chambers between the myocardium and pericardium, and mimicking a cardiac tumor especially an angiosarcoma. Serologic tests were negative and no other organs were affected.

Generally cardiac hydatid cysts are univesicular. The diagnosis of multivesicular cardiac hydatid cyst was confirmed by MRI, which showed hypointensity on T1-weighted images and hyperintensity on T2-weighted images, and no contrast absorption in these echolucent areas.

The patient was operated on for cardiac hydatid cyst and medical treatment with albendazole was instituted after surgery. Pathologic examination confirmed the diagnosis. This case stresses the importance of MRI in differentiating a multivesicular cardiac hydatid cyst from cardiac tumors, especially angiosarcoma.

**Figures.** (A) Two-dimensional echocardiography showing a mass with multiple echolucent areas near the right heart chambers. (B) A magnetic resonance scan showing hyperintensities on T2-weighted images compatible with a multivesicular cardiac hydatid cyst.