The diagnosis of constrictive pericarditis causing heart failure was considered. The patient showed a good response to evacuation paracentesis and diuretics. Since then, he has been admitted to hospital two more times for therapeutic readjustment and remains stable.

Constrictive pericarditis can occur after any pericardial disease process, but most cases are still deemed to be idiopathic.\(^{1,2}\) Pericardiectomy is the only definitive treatment option\(^1-3\) but medical therapy may be used for patients who are not candidates for surgery.\(^3,4\)

A 80-year-old man presented to the emergency department with gradually progressive abdominal distension and edema of his lower limbs first noticed several months before.

A chest x-ray lateral view showed calcification of the pericardium (Fig. 1). A computed tomography of the chest showed thickening of the pericardium with evidence of calcification (Fig. 2). Abdominal ultrasound revealed ascites, hepatomegaly and portal and hepatic veins dilatation. Laboratory tests ruled out viral infection, autoimmune disease and tuberculosis.

PROTECTION OF HUMANS AND ANIMALS
The authors declare that the procedures were followed according to the regulations established by the Clinical Research and Ethics Committee and to the Helsinki Declaration of the World Medical Association.

DATA CONFIDENTIALITY
The authors declare having followed the protocols in use at their working center regarding patients’ data publication.

REFERENCES

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