Transdiaphragmatic growth of asymptomatic dumb-bell thymoma

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Received 21 June 2010; received in revised form 24 August 2010; accepted 27 August 2010; Available online 3 December 2010

Keywords: Mediastinum; Abdomen; Thymoma

A large B1 thymoma was diagnosed in an asymptomatic 52-year-old man. In addition to mediastinal vessels, left lung and parietal pleura infiltration (Fig. 1), a dumb-bell growth around the aorta was detected in the retroperitoneum, with direct infiltration of the left adrenal gland and left renal vessels (Fig. 2).

Fig. 1. CT scan revealed a large inhomogeneous mass with focal area of calcification and diffuse infiltration of the left lung and parietal pleura. Pleural percutaneous biopsy revealed a cortical thymoma CD3+ CD99+ and CD1a+ which was classed as B1 type according to WHO classification. The mass was unchanged after six cycles of chemotherapy; at PET scan after chemotherapy, SUV was 7.1. At preoperative MRI of the chest, extrafascial plane invasion was not shown.

Fig. 2. CT scan showed retroperitoneal growth along the right diaphragmatic crura with a bilobated mass infiltrating left adrenal gland, splenic and renal vessels, and the pancreatic tail. Without response to chemotherapy, staged thoracic and abdominal surgical exploration was planned. At thoracotomy, extrafascial disease was found and procedure stopped.

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