MATURE TERATOMA OF THE POSTERIOR MEDIASTINUM: A CASE REPORT
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Objectives: Neurogenic tumours are the most common neoplasm of the posterior mediastinum. A teratoma of the mediastinum is an uncommon germ cell tumour. Five per cent of germ cell tumours are extragonadally located, and men are affected more than women. Most mediastinal teratomas produce no symptoms. They are more commonly associated with compression of adjacent structures, predominantly those of the respiratory system. We present a case of a teratoma of the mediastinum which was continuous with the diaphragmatic muscle and aortic hiatus, causing odynophagia due to extrinsic compression of the oesophagus.

Methods: A 21-year-old female presented with dysphagia and odynophagia, especially for solids and an unintended weight loss of seven kilograms. Non-invasive diagnostic workup with chest computed tomography scan was suggestive of a congenital pulmonary malformation. Magnetic resonance imaging, on the other hand, was suggestive of an extra-adrenal paraganglioma. Normal findings on serum, 24 h urinary catecholamine assays and MIBG scan excluded a phaeochromocytoma. Because of the lack of a histological diagnosis and considering the fact that it concerned a solid tumour, we decided to remove the tumour by a Da Vinci-assisted thoracoscopy.

Results: Technically the procedure proceeded uneventfully. A histological diagnosis of a mature teratoma was obtained. The patient recovered without complications, with complete disappearance of the dysphagia and odynophagia and was discharged on the fourth postoperative day.

Conclusions: We present a case of a mature teratoma causing odynophagia due to extrinsic compression of the oesophagus. The diagnosis of this tumour proved to be very difficult through non-invasive investigation. The correct diagnosis was only obtained by a surgical approach.