

Lung pseudo-cavity

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- Lung pseudo-cavity
- Chest calcified pleurisy

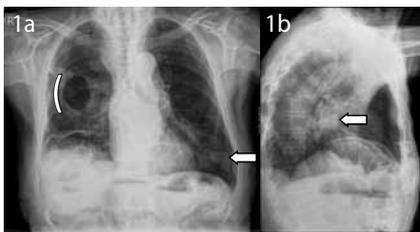


FIGURE 1. Chest X-ray. Posteroanterior view (1a) shows a lung cavity with thick walls and smooth internal wall outline on the right middle lung field (*bracket*). The cavity is not depicted on the lateral view (1b). A nodule in the left lower lobe (*horizontal arrow*) and high position of intestine can also be seen.

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A 92-years-old patient, non-smoker, with a history of hypertension was presented with fever and hemoptysis. On chest auscultation there were no abnormal breath sounds. PO₂ was 96% in room air breathing. The posterior-anterior chest radiograph (Figure 1a) revealed a cavity with thick walls and smooth internal limits on the right middle lung field, not depicted in the lateral chest radiograph (Figure 1b). A nodule in the left lower lung field (*horizontal arrow*) and loops of intestine over the liver were also illustrated.

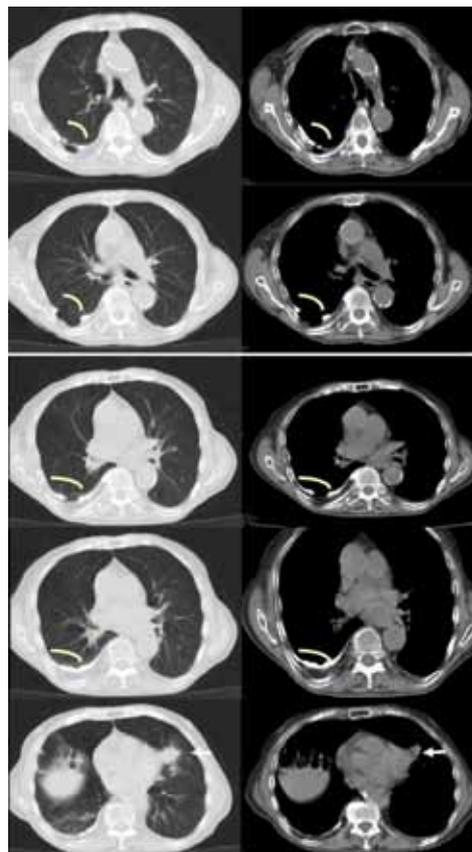


FIGURE 2. Chest Computed Tomography. No lung cavity is depicted. Extensive right-sided calcified pleurisy with discontinuities and incomplete cavity formations is present (*brackets*). Nodules 3 (*horizontal arrow*), and 1 cm in diameter on the left lower lung field, intestine over the liver and dilated pulmonary artery can also be seen.

Chest Computerized Tomography (Figures 2, 3) showed right-sided extensive calcified pleurisy without presence of any cavity. The calcified pleurisy presented discontinuities and formation of imperfect cavity formations (*brackets*), the projection of which apparently gave the image of lung cavity formation. Nodules in the left lower field (*horizontal arrow*), intestine over the liver and dilated pulmonary artery were also illustrated.

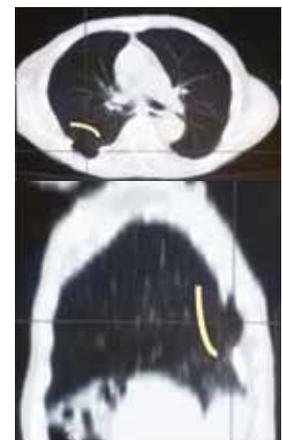


FIGURE 3. Sagittal section of CT also reveals the incomplete cavity formed by calcified pleurisy (*bracket*).