

Endobronchial amartoma

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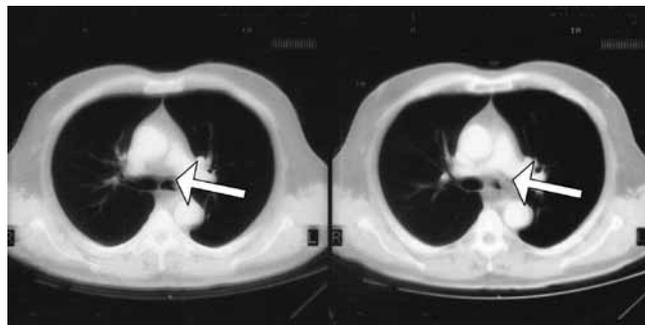
Inspiratory wheezing heard on auscultation of the lungs in a 63 year-old man who was a current smoker, with a normal chest X-ray and obstructive disorder on spirometry for which he had been receiving chronic obstructive pulmonary disease (COPD) treatment for a long time without improvement in symptoms, led to revision of the diagnosis. Chest computed tomography (CT) scan (Figure 1) showed an endobronchial lesion at the level of the main left bronchus and bronchoscopy (Figure 2) revealed a mass which obstructed the left main bronchus by 95%. On oesophagography (Figure 3) the mass left an imprint on the oesophagus wall at the level of the main carina.

Radical resection of the tumour was performed and histological examination showed a lung hamartoma. Post-operative bronchoscopy and chest CT (Figures 4, 5) revealed restoration of airway patency.



EIKONA 3

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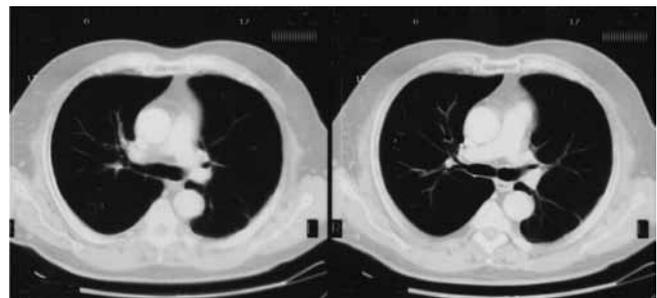
EIKONA 1



EIKONA 2



EIKONA 4



EIKONA 5