

A 51-Year-Old Woman With an Increasing Chest Wall Mass Years After Resection of an Early Stage Lung Cancer



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CASE PRESENTATION: A 51-year-old woman was found to have a new 14 × 6 mm soft tissue mass under the right serratus muscle on a CT scan of the chest performed for routine surveillance due to her history of stage I lung cancer. A follow-up CT scan performed 4 months later showed that the mass had increased in size to 22 × 8 mm. The patient presents to the oncology clinic to discuss the results of the CT scan. She has no pain or swelling on the right lateral chest and no cough, fever, or shortness of breath. She is at her baseline health with good appetite and functional status. CHEST 2017; 152(6):e151-e154

Medical History

Four years earlier, the patient had been diagnosed with stage I right lung adenocarcinoma after the incidental finding of a lung nodule on a chest radiograph performed during preoperative assessment for a dilation and curettage for prolonged menstrual bleeding. A CT chest scan revealed a 1.5-cm spiculated nodule in the right lower lobe (Fig 1). A fludeoxyglucose PET/CT scan showed uptake in the nodule, with a maximum standardized uptake value of 3.1. There were no other signs of malignant disease on the scan. She underwent transthoracic CT-guided core needle biopsy of the nodule with an 18-gauge needle; the biopsy was positive for adenocarcinoma with papillary features. Subsequent mediastinoscopy showed no evidence of lymph node metastasis. A wedge resection of the nodule was performed with a 2.3-cm staple margin. The final pathological diagnosis was pT1aN0M0, a

well-differentiated adenocarcinoma with negative margins for cancer involvement. No adjuvant chemotherapy or radiation therapy was offered because of the low risk of recurrence. The patient has been surveilled every 6 months with chest CT scans and clinical assessments.

Physical Examination Findings

The patient's vital signs are stable. Her physical examination is unremarkable. No abnormal mass is felt on the prior incision sites or anywhere on the right side of the chest.

Diagnostic Studies

The patient's blood cell counts, serum electrolyte levels, and renal and liver functions are within normal range. She undergoes CT-guided percutaneous biopsy of the sub-serratus mass (Fig 2).

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DOI: <http://dx.doi.org/10.1016/j.chest.2017.08.010>

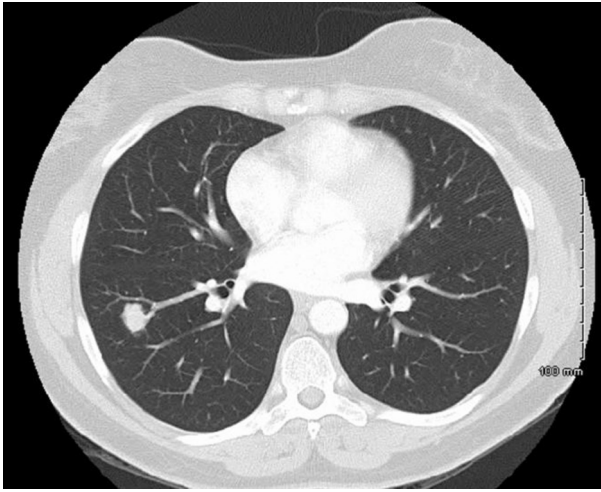


Figure 1 – Right lower lobe nodule at initial diagnosis.

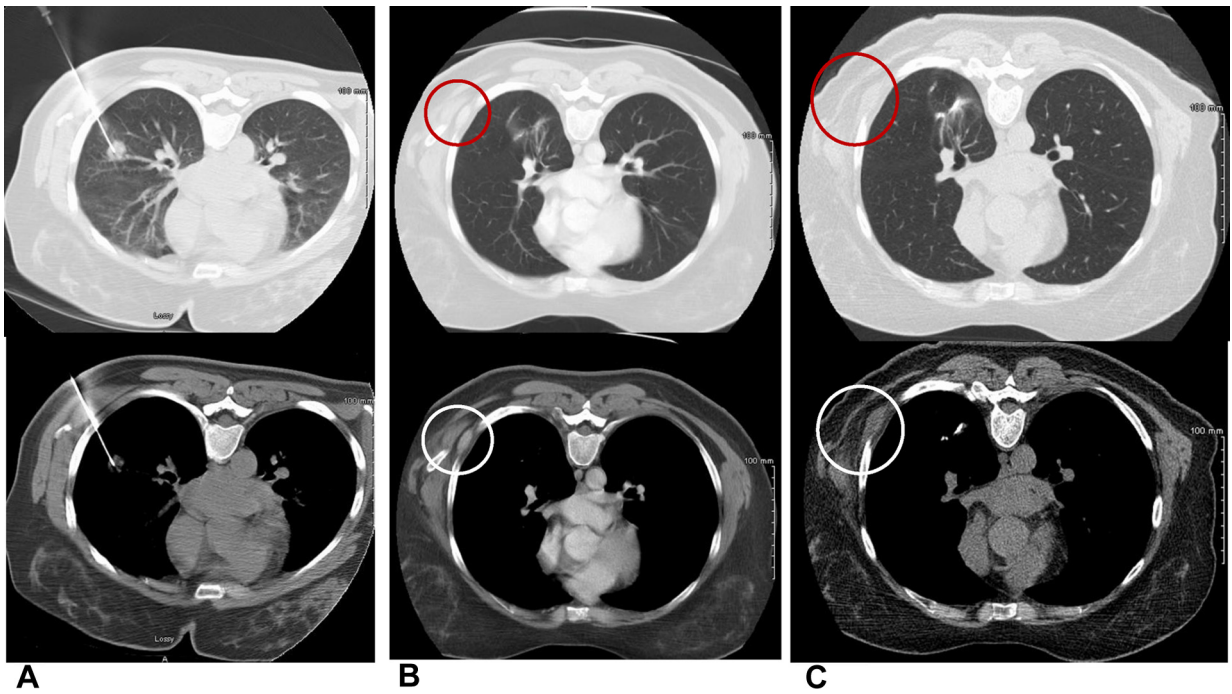


Figure 2 – A-C, Percutaneous transthoracic needle biopsy and comparison scans showing location of new chest wall mass. A, Initial diagnosis; B, 44 months following resection; and C, 48 months following resection.

What is the diagnosis?

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