



Image of the month

Multinodular Esophageal Leiomyomatosis: An Uncommon Cause of Mediastinal Mass[☆]



Leiomiomatosis multinodular esofágica: una causa infrecuente de masa mediastínica

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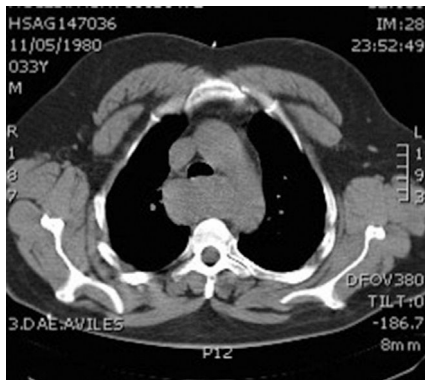


Fig. 1

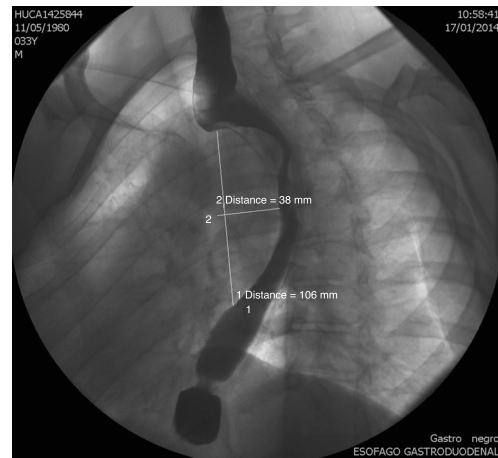


Fig. 2

The patient is a 34-year-old male who complained of poorly defined thoracic pain, with no dysphagia, reflux or vegetative symptoms. Chest radiograph demonstrated a mediastinal mass. CT was ordered, which detected findings of a well-defined homogenous mediastinal mass that caused narrowing of the esophagus, measuring 10.9 cm x 3.3 cm, reaching from the thoracic opening until several centimeters below the carina (Fig. 1). The esophagus-gastro-duodenal study showed an extrinsic lesion measuring 11 cm x 4 cm that affected the left esophageal anterolateral region (Fig. 2). Endoscopic ultrasound confirmed the presence of a subepithelial mass within the esophageal wall. FNA results were compatible with leiomyoma. Esophagectomy was performed, and the pathology results confirmed the mass as a multinodular esophageal leiomyomatosis.

Diagnosis: Multinodular esophageal leiomyomatosis.

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