

Images in medicine

Round pneumonia in an elderly woman

Neumonía redonda en mujer de edad avanzada

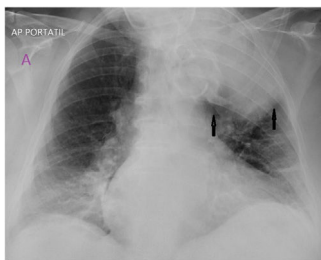
Javier Navarro-Esteva^{a,*}, Juan María Arroyo-Delgado^b, Federico López-Sagastume^b^a Neumología, Hospital San Roque Maspalomas, Maspalomas, San Bartolomé de Tirajana, Spain^b Medicina Interna, Hospital San Roque Maspalomas, Maspalomas, San Bartolomé de Tirajana, Spain

Figure A.

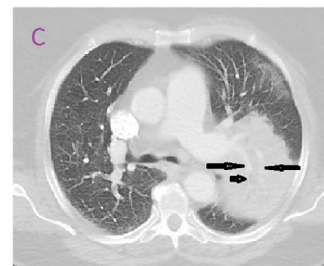


Figure C.

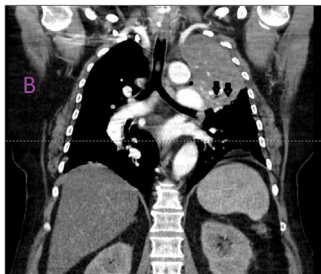


Figure B.

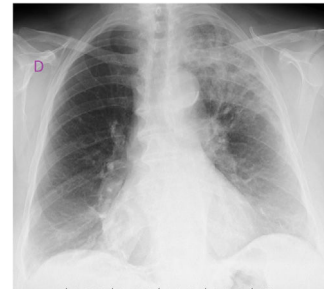


Figure D.

In adults, round pneumonias may be due to infections like Q fever, *legionella micdadei*, *streptococcus pneumoniae*, *hemophilus influenzae*, or *rickettsia typhi*, and noninfectious causes like bronchogenic carcinoma, round atelectasis, organizing pneumonia, bronchopulmonary sequestration, granulomatosis with polyangiitis, septic pulmonary emboli, rheumatoid nodules or sarcoidosis. They are rarely seen in adults because the development of the pores of Kohn and canals of Lambert is completed by the age of eight.^{1,2} A 70 year-old woman exsmoker with coronary heart disease and diabetes was admitted with high fever, purulent sputum, dyspnea and anorexia. She was tachypneic, tachycardic and required a FiO₂ of 50% to ensure adequate oxygenation. Inflammatory markers were markedly elevated – leucocytes, neutrophils, procalcitonin. A presumptive diagnosis of community acquired pneumonia was made, CURB65: 4/5.

Round left upper lobe infiltrate with clear borders (arrows) is shown in Fig. A. The CT identifies a homogeneous mass-like infiltrate with some air bronchogram (short arrows) and no distortion of the pulmonary vessels (long arrows) (Figs. B, C). On the day of discharge, the “mass” is vanished (Fig. D).

The blood cultures were positive for *streptococcus pneumoniae*. The response to antibiotics was adequate and the patient was discharged ten days later. The disappearance of the infiltrate may help avoid an unnecessary bronchoscopy.

References

1. Cunha BA, Gran A, Simon J. Round pneumonia in a 50 year-old man. *Respir Care* 2013;58:e80–2, <http://dx.doi.org/10.4187/respcare.02219>.
2. Camargo JJ, Camargo SM, Machuca TN, Perin FA. Round pneumonia: a rare condition mimicking bronchogenic carcinoma. Case report and review of the literature. *Sao Paulo Med J* 2008;126:236–8.

* Corresponding author.

E-mail address: jnesteve7@hotmail.com (J. Navarro-Esteve).