Giant intrapleural mass: an unusual presentation of Hodgkin’s lymphoma

Philip McElnay
Rebecca Llewellyn-Bennett
Joya Pawade,
Ladli Chandratrey
Douglas West
Dept. of Thoracic Surgery
Background

- Epidemiology
  - Secondary Pulmonary involvement in Hodgkin’s: 15-40% of cases
  - Primary Pulmonary Hodgkin’s lymphoma: 70 cases 1927-2006
- Diagnosis
  - Surgical intervention can be avoided if a tissue diagnosis is made: CT guided biopsy
Patient

- 61
- Female
- Fit and well
- Light smoker
- FEV1/FVC: 2.16/2.62 (predicted 2.75/3.23)
Clinical Presentation

- 2 month history
- Dry cough
- Breathlessness
- No B symptoms
- Examination: no signs including no palpable lymphadenopathy
Radiological Appearance

• Urgent Chest X-Ray
• CT Chest
Pre-operative Histopathology

• US guided biopsy: failed
• CT guided biopsy: fibrous tissue
• Working diagnoses:
  – Solitary fibrous tumour
  – Benign intrapulmonary disease
Operative Intervention

- Clamshell Thoracotomy
- Lower Lobe Mass:
  - adherent to pericardium, upper lobe, proximal pulmonary artery
- Wedge resection along with pericardium
- Pericardium reconstructed with large Marlex/Goretex patch
Diagnosis

- 135x120x95mm tumour
- Histopathology:
  - mononuclear blasts with multilobated nuclei and prominent nucleoli
  - Reed Sternberg cells
  - CD30 expression
Further Management

- 6 cycles of ABVD chemotherapy
- PET CT after 2 cycles: metabolic remission
- CT chest after 10 months: no evidence of active lymphoma
- Last date of follow up: Jan 2013. Well.
Primary Pulmonary Hodgkin’s Lymphoma

• Diagnostic criteria
  1. Confined to lung in which disease arises
  2. Histology= Hodgkin’s Lymphoma
  3. Other possibilities are excluded

• Presenting symptoms
  – Weight loss, night sweats, fevers

• Treatment
  – Medical: ABVD chemotherapy
Learning Points

• Normal pulmonary Hodgkin’s: Multiple nodules, irregular margins
  – This case: single solitary mass
• Size
  – This case: mass unusually large
• This case: CT guided biopsy negative
  – Risks of operative intervention
  – PPHL a difficult diagnosis to make
  – Rare differential diagnosis of lung masses
Questions?