Pleural Mass Originating from a Gonadal Teratoma

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Picture.

A 32-year-old man was referred to our hospital following a one-month history of dyspnea. He had no history of exposure to asbestos. A chest CT scan revealed diffuse pleural masses with massive pleural fluid in the left lobe (Picture A). CT of the abdomen showed a large retroperitoneal mass with calcification (Picture B). No malignant cells were found in the specimens obtained from the pleural fluid; however, the serum alpha-fetoprotein level was 14.2 ng/mL. The findings of a urological examination with ultrasonography were highly suggestive of a gonadal teratoma. The findings of a pathological specimen obtained from the right testis were consistent with the imaging findings, and a diagnosis of gonadal teratoma was established. The patient received platinum-based chemotherapy, exhibiting a partial response with a decrease in the pleural fluid.

The alpha-fetoprotein level provides important informa-

tion with regard to the presence of gonadal or extragonadal teratomas (1). Although very rare (2), in such patients physicians should rule out the possibility of pleural dissemination from gonadal teratomas.

The authors state that they have no Conflict of Interest (COI).

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