Nodular Cytomegalovirus Pneumonia

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A 68-year-old man presented with widespread lymphadenopathy. A lymph node biopsy showed peripheral T-cell lymphoma. Multiple nodules were detected in both lungs on CT. A transbronchial lung biopsy revealed cytomegalic inclusion bodies in the alveolar (type II) pneumocytes and mild interstitial reactions without lymphoid infiltration (Picture 1A). We also performed immunohistochemistry on the infected cells with anti-cytomegalovirus antibody (CCH2+ DDG9, Dako, Glostrup, Denmark) using a Benchmark automatic immunostaining device (Ventana Medical System, Tucson, USA) (Picture 1B). The typical CT morphology associated with cytomegalovirus pneumonia is a ground-glass

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appearance associated with the nodules, and micro-nodules (1-5 mm) are also common findings (1, 2). However, in the present case only multiple nodules (>5 mm) were seen (Picture 2). The patient’s cellular immunity may have been compromised by the lymphoma; there were no other risk factors, such as immunosuppressive drugs, and clinically the patient did not exhibit any respiratory symptoms. Cytomegalovirus pneumonia should be considered when multiple nodules are observed on CT films in a patient with malignant lymphoma.

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References