Life-threatening Tracheal Benign Tumor: Lipoma

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Key words: tracheal lipoma, bronchoscope, stridor

(Intern Med 55: 1677-1678, 2016)

(DOI: 10.2169/internalmedicine.55.6334)

Picture 1.

Picture 2.

Picture 3.

Picture 4.

A 35-year-old man presented to the emergency room with near-fatal dyspnea. Six months earlier, he suffered from a non-productive cough and progressive dyspnea and was previously treated for asthma. On examination, stridor was noted. Chest radiography revealed a soft tissue density mass in the trachea (Picture 1) and computed tomography re-

vealed an endotracheal soft tissue tumor obliterating more than 90% of the trachea diameter (Picture 2). He underwent emergency flexible bronchoscopy with tumor resection (Picture 3). The tumor was pathologically diagnosed as a tracheal lipoma (Picture 4).

Most tumors of the tracheobronchial tree are malignant.

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Received for publication August 8, 2015; Accepted for publication September 27, 2015

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Benign pulmonary tumors are rare, with lipoma being extremely rare (1). Trachea lipoma is histologically benign and can cause an airway obstruction. Treatment can include bronchoscopy; however, if bronchoscopic management is not possible, surgical resection should therefore be considered before it leads to death (2).

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

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