

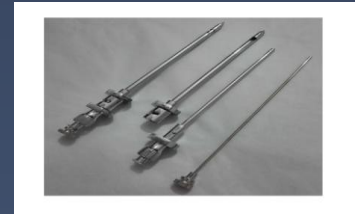
# A rare case of cholangiosarcoma metastatic to the pleura, diagnosed the old way

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- **Background:** Cholangiocarcinomas (CCAs) are diverse biliary epithelial tumors involving the biliary tree. They have extremely aggressive metastatic behaviour resulting in a very poor prognosis. Metastasis are usually observed at intrahepatic site, local and distal lymphnodes and peritoneum. Pulmonary and pleural metastasis are very rare. Abrams needle biopsy is a “blind” or closed pleural biopsy used since 1955, which tends to be abandoned, but still in use in our department.



•**Case report:** We describe the case of an 82 years-old male, who was diagnosed with mediastinal lymphadenopathy and pleural effusion after an accident. The patient had a history of cholangiocarcinoma treated with surgery after induction chemotherapy with oxaliplatin/5FU, two years ago. The patient was submitted to bronchoscopy and mediastinal lymphnodes sampling with EBUS, which was negative for malignancy. A pleural biopsy with Abrams needle followed and the histology was positive for metastatic adenocarcinoma from the biliary tract.

- **Conclusion:** Pleural dissemination of cholangiocarcinoma is rare and diagnosis is usually relied on video-assisted thoracoscopic surgery. The sensitivity of Abrams biopsies for malignancy ranges between 27% and 60%, and, in the largest review of 2,893 Abrams samples, the diagnostic yield for malignancy is 57%. Still, in experienced hands, it can help diagnose exudative lymphocytic pleural effusions when image-guided techniques are unavailable or if the patient is not unable to tolerate thoracoscopy and also as a first-line diagnostic tool in resource-poor settings. In our case, a rare disease was diagnosed in an old-fashioned way, reminding us it is a skill not to be abandoned

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