

CENTRAL ENDOBRONCHIAL HAMARTOMA RESECTED BY CRYOSURGERY: A CASE REPORT

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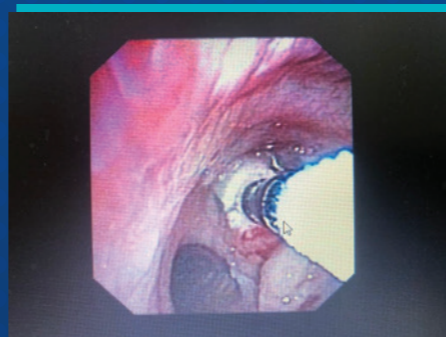
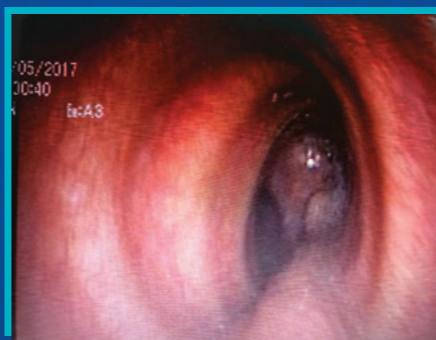
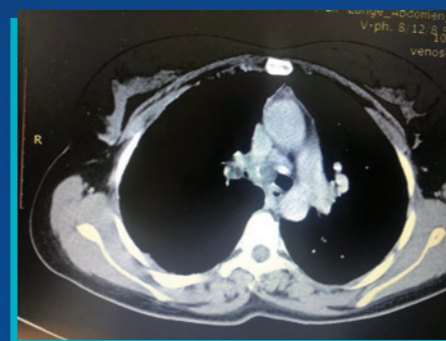
INTRODUCTION

Pulmonary hamartoma is a benign lung neoplasm and it comprises 6% of solitary pulmonary nodules. Two clinical types have been defined according to its location: intraparenchymal (90%) and endobronchial (10%).

CASE PRESENTATION

We report a 32-year old female patient who presented with a 5-6 years with shortness of breath and wheezing, misdiagnosed as having asthma. CT scan showed a lesion in the right main bronchus, and bronchoscopy confirmed the presence of an endobronchial tumor. This lesion was completely excised with bronchoscopy by cryosurgery.

Biopsy confirmed to be a chondromatous hamartoma



DISCUSSION

The incidence of pulmonary hamartoma in the general population is 0.25%. Pulmonary hamartomas are usually asymptomatic in contrast, endobronchial hamartoma is often symptomatic, and the most common complaints of patients are hemoptysis and obstructive pneumonia. The management of endobronchial hamartoma must be individualized according to the characteristics of each patient and the location of the tumor.

Conclusion: CT scans and bronchoscopy is valuable investigations and should be performed in any older patients with a prolonged picture of late-onset asthma. Flexible bronchoscopy is adequate tissue sample for diagnosis of benign tumors. A rigid bronchoscopy and biopsy/removal of the mass are the treatments of choice.

Key Words: Endobronchial lesions, chondroid hamartoma, Cryosurgery, Therapeutic bronchoscopy.

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