### **Images in paediatrics**

# Where are the lungs? An unusual mediastinal mass

A 2-year-old boy was referred to our department for gradual onset of breathlessness over 2 months. Physical examination revealed tachypnoea and bilaterally reduced breath sounds. Chest x-ray showed opacification of both lung fields (figure 1), and chest CT scan revealed a huge mediastinal mass originating from the thymus ( $15.2 \times 11.2 \times 8.8$  cm) filling the whole thoracic cavity (figure 2). An uneventful percutaneous biopsy excluded lymphoma; the mass was subsequently resected and found to be a type B1 thymoma. The child has been followed up without recurrence for 3 months.

Thymoma is exceedingly uncommon in children and young adults.<sup>1</sup> Type A has neoplastic epithelial cells with oval/ spindle-shaped nuclei and in type B the cells have a predominantly round/polygonal appearance. Type B thymoma is further subdivided on the basis of the atypia of the neoplastic epithelial cells into subtypes B1, B2 and B3. Thymic carcinoma is type C.<sup>2</sup>

In summary, thymomas represent less than 1% of all mediastinal tumours in children but should be considered in the differential diagnosis of mediastinal masses because of their invasive potential, parathymic syndromes and the association with other malignancies.<sup>3</sup>

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#### Competing interests None.

Provenance and peer review Not commissioned; externally peer reviewed.

Accepted 21 June 2011 Published Online First 9 Aug 2011

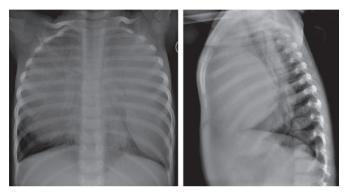


Figure 1 Chest x-ray showing opacification of both lung fields.

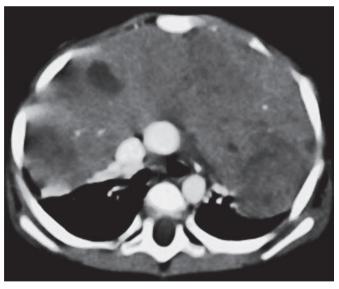


Figure 2 CT scan showing massive mediastinal mass ( $15.2 \times 11.2 \times 8.8$  cm) originating from the thymus and filling the whole thoracic cavity.

Arch Dis Child 2011;96:959. doi:10.1136/archdischild-2011-300376

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Arch Dis Child 2011 96: 959 originally published online August 9, 2011 doi: 10.1136/archdischild-2011-300376

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