22 Year Old Female with Mediastinal Neuroblastoma

Michael O’Neill 1

1. University of Miami Miller School of Medicine, Portland, USA

Corresponding author: Michael O’Neill, moneill2@med.miami.edu

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Abstract

A 22-year-old woman presented with a 6 month history of dyspnea, which became especially intolerable over the previous 2 months. Associated symptoms included right chest pain and back pain, which had concomitantly worsened. Patient was in moderate respiratory distress and found to be hypoxemic, hypotensive, and tachycardic. An AP portable chest radiograph showed complete opacification of the right hemithorax with contralateral tracheal deviation. On CT, there was a large, heterogeneous mass with lobulated margins, which appeared to be centered in the upper right posterior mediastinum. There was also a large associated right pleural effusion and significant mediastinal adenopathy. In the abdomen, there was metastatic disease to the liver. MRI showed invasion of ipsilateral upper thoracic neural foramina and evidence of upper thoracic bone marrow involvement. Tc-99 MDP Bone Scan and MIBG scans confirmed thoracic spine as well as bone marrow involvement, and metastatic disease to the liver. She was treated aggressively by the medical oncology, surgical oncology, and radiation oncology teams, but ultimately succumbed to her disease approximately one year later. Neuroblastoma remains the third most common childhood malignancy, after leukemia and CNS tumors, with only 5% of all cases presenting after 10 years of age. The disease course in adolescent and adult population tends to be more indolent, yet the overall survival appears to be significantly worse. We present a rare case of Adult Neuroblastoma in the hopes that it may be appropriately considered as a possible etiology of posterior mediastinal masses in this population.