

Clinical Image

Pulmonary Giant Angiofibrolipoma

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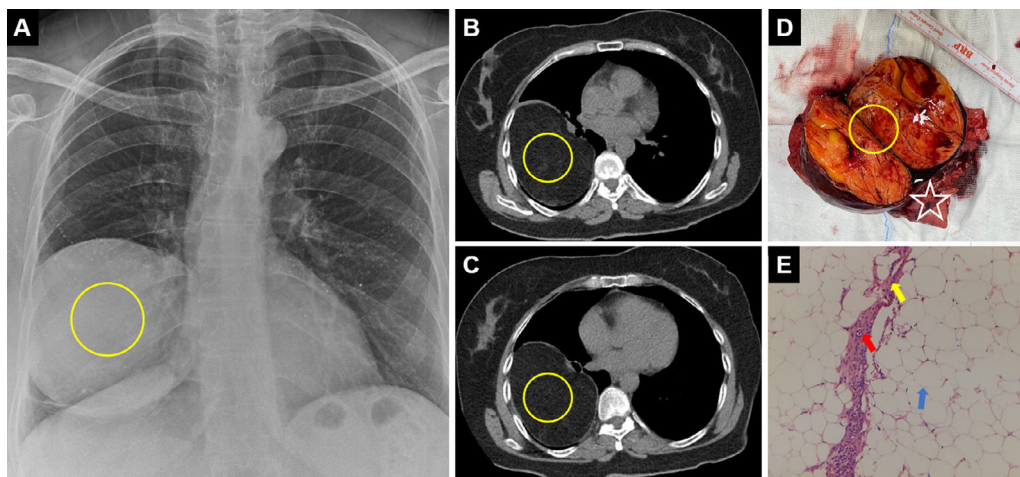


Fig. 1. Posteroanterior chest radiograph (A) and thorax computed tomography axial sections (B, C) show a 110 mm × 105 mm × 100 mm, well-circumscribed, intraparenchymal lesion with fat density in the right lower lobe (circle). Macroscopic structure of lung tissue (D) after lower lobectomy and angiofibrolipoma (circle) and lung tissue (asterisk) after excision of the intraparenchymal lesion are shown. A benign mesenchymal neoplasm comprising mature adipocytes (blue arrow), capillary vascular vessels (red arrow) and fibrocytes (yellow arrow), separated from the lung by a smooth fibrous capsule, is observed in the lung neighborhood (E).

A 56-year-old woman presented with dyspnea and cough. Radiological findings revealed an intraparenchymal giant lipomatous lesion in the lower lobe of the right lung. The patient underwent right lower lobectomy (Fig. 1). Postoperative histopathological examination was evaluated as an angiofibrolipoma. The patient was uneventfully discharged on the 5th postoperative day. Angiofibrolipoma is a soft tissue benign tumor composed of mature adipocytes, vascular tissue and collagenous connective tissue. It usually presents as a solitary, subcutaneous, circumscribed lesion on the back, neck or shoulders.^{1,2} There is no report of angiofibrolipoma arising in the lung parenchyma in the literature so far. Definitive treatment can be achieved with surgical treatment. Angiofibrolipoma should be kept in mind in the differential diagnosis of well circumscribed pulmonary lesions.

Funding

The authors received no financial support for the research and/or authorship of this article.

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Conflict of Interests

The authors declare that they have no conflict of interest in the publication of this article.

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