



Clinical Image

Unusual Cause of Bronchial Obstruction: Tracheobronchial Amyloidosis



Una causa poco frecuente de obstrucción bronquial: amiloidosis traqueobronquial

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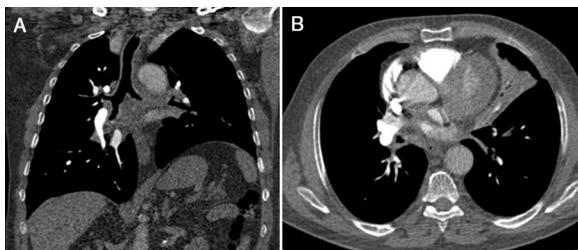


Fig. 1. (A) Post-contrast coronal CT scan reveals diffuse thickened tracheobronchial wall. (B) Axial CT scan shows atelectasis in the lingular segment of the left upper lobe.

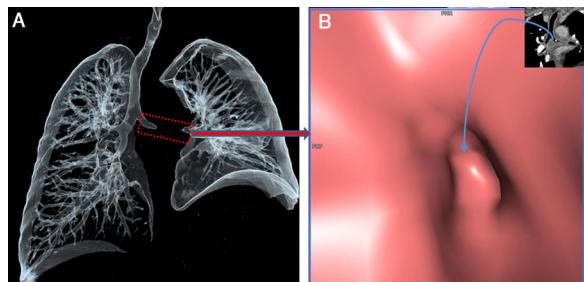


Fig. 2. Three-dimensional volume-rendered air-specific coronal plan MDCT image (A) and virtual CT bronchoscopy (B) demonstrate obstruction (frame and arrow) of the left main bronchus.

A 60-year-old male presented with complaints of chronic cough, occasional mucus secretion, and dyspnea. Coronal CT scans revealed diffuse thickened tracheobronchial wall (**Fig. 1A**). Axial CT scan showed atelectasis in the lingular segment of the left upper lobe (**Fig. 1B**). Three-dimensional volume-rendered air-specific coronal plan MDCT image (**Fig. 2A**) and virtual CT bronchoscopy (**Fig. 2B**) demonstrated obstruction of the left main bronchus. Bronchoscopic biopsy diagnosed diffuse tracheobronchial amyloidosis.

Primary tracheobronchial amyloidosis has rarely been reported in the literature.^{1,2} There is no relationship between endobronchial amyloidosis and systemic amyloidosis.¹ The endobronchial involvement can mimic a tumoral lesion. Although it is very rare,

tracheobronchial amyloidosis should be considered in case of bronchial obstruction.

References

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2. Berraondo J, Novella L, Sanz F, Lluch R, de Casimiro E, Lloret T. Management of tracheobronchial amyloidosis with therapeutic bronchoscopic techniques. *Arch Bronconeumol.* 2013;49:207–9.

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