



Clinical Image

Transmural Thoracic Lipoma[☆]



Lipoma torácico transmural

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We report the case of a 74-year-old woman who underwent chest X-ray during a work-up for a urinary tract infection, revealing a mass in the right upper hemithorax. She did not have any respiratory symptoms. The work-up was extended to include computed tomography (Fig. 1) that showed a subscapular mass



Fig. 1.

with fat density invading the thoracic space via the gap between the third and fourth ribs, but without erosion or destruction of these structures. The mass was identified as a transmural lipoma.

Thoracic lipomas may either be purely intrathoracic or hourglass-shaped, with components developing on each side of the chest wall. These hourglass masses are divided into 2 subtypes: cervicomedial and transmural.¹

Transmural lipomas are very uncommon, benign tumors, rarely described in the literature, and probably underdiagnosed since they are mostly asymptomatic, with slow growth that typically remodels the ribcage, rather than eroding or destroying it. Only when they reach a considerable size can they collapse the lung or even invade the spinal canal, requiring resection.

In this case, the patient refused all invasive diagnostic or therapeutic procedures.

Reference

1. Jain V, Singal AK, Gupta AK, Bhatnagar V. Transmural intrathoracic lipoma with intraspinal extension. *J Pediatr Surg.* 2007;42:2120–2.

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