

Clinical Image

**Lipoleiomyosarcoma of the Mediastinum in an Asymptomatic Male Patient**☆



**Lipoleiomyosarcoma del mediastino en paciente varón asintomático**

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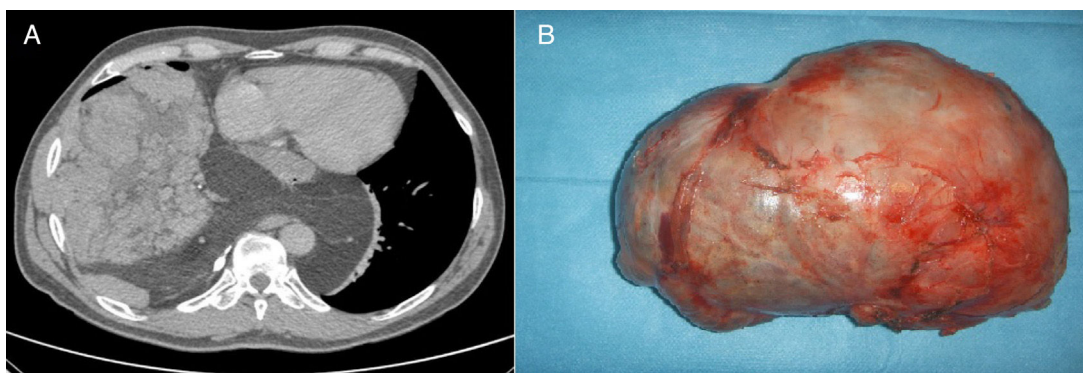
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**Fig. 1.** (A) Chest CT, mediastinal window. (B) Surgical specimen.

We report the case of a 63-year-old man with no significant history and no symptoms, who underwent a chest X-ray, revealing opacities in the right hemithorax. A computed tomography was requested, showing a lobulated solid soft tissue mass in the mid-mediastinum and right subpulmonary compartment, measuring 17 cm in the anteroposterior and 14 cm in craniocaudal diameter. A muscular and vascular component was observed, with calcification in the right paraspinal sector. The mass was growing on both sides of the midline. The largest solid component occupied the right sector, collapsing the lung, with another portion impinging on the posterior heart contour, extending to the carina (Fig. 1A).

The patient underwent right posterolateral thoracotomy, revealing a giant encapsulated tumor occupying 2 thirds of the pleural cavity, that was completely removed (Fig. 1B). Pathology study reported grade 1 lipoleiomyosarcoma measuring 30 cm×20 cm×12 cm, with 1 mitosis per 10 HPF and immunohistochemistry positive for actin and desmin in the smooth muscle component, and positive for CD34 in an area of fibrosis. The patient is currently in follow-up with no evidence of relapse. Mediastinal sarcomas are very uncommon (less than 2%), and the lipo-leiomyosarcoma combination is even rarer. The ideal treatment is complete resection, which is a prognostic factor for recurrence.

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