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Image of the month

Critical tracheal stenosis caused by endothoracic goiter

Estenosis traqueal crítica por bocio endotorácico

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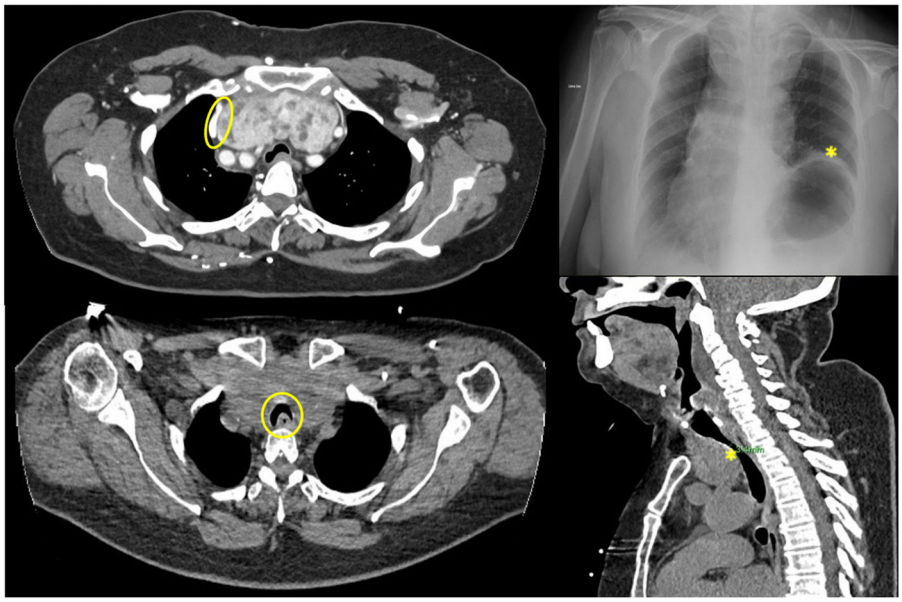

Figure 1 – Several manifestations of compression syndrome caused by the endothoracic goiter: collapse of the superior vena cava; elevated left hemidiaphragm due to paralysis of the left phrenic nerve; and critical tracheal stenosis.

The patient is a 77-year-old woman with a history of schizophrenia, incipient Alzheimer's disease, and endothoracic autonomous multinodular goiter that had been progressing for several years.

The patient came to the emergency room due to sudden dyspnea with acute hypoxemic respiratory failure. Chest radiograph and CT scan (Fig. 1) demonstrated: a voluminous endothoracic goiter that was causing important tracheal stenosis (anteroposterior diameter of 3.4 mm); elevated left hemidiaphragm (probably secondary to phrenic nerve compression); superior vena cava syndrome; and subsegmental pulmonary thromboembolism in the right middle and lower lobes (Fig. 1).

We performed urgent decompressive left hemithyroidectomy. The patient's postoperative evolution was favorable.

Diagnosis: Extrinsic critical tracheal stenosis due to endothoracic goiter

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