



Image of the month

Intrathoracic Multinodular Goiter Surpassing the Aortic Arch [☆]



Bocio multinodular endotorácico que sobrepasa cayado aórtico

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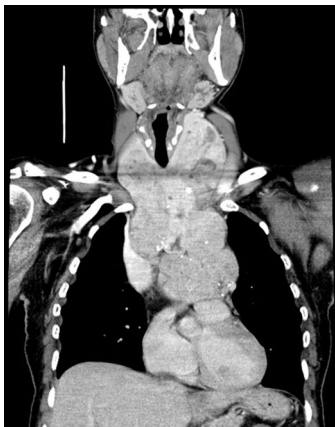


Fig. 1

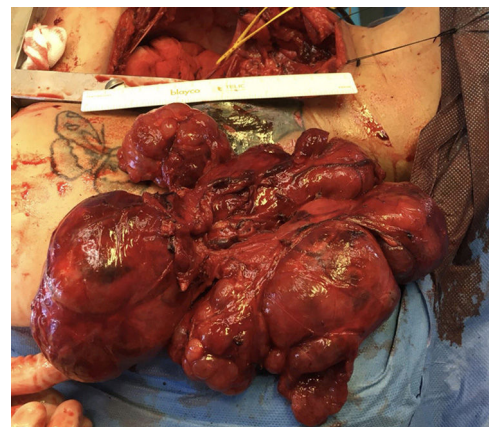


Fig. 2

A 46-year-old female patient presented multinodular goiter with symptoms of compression that had been progressing over the previous 2 years; lab work was suggestive of subclinical hyperthyroidism. After ultrasound and computed tomography, a cervical-mediastinal mass measuring 20 cm in craniocaudal length was observed to be compressing the trachea and esophagus, displacing the supra-aortic trunks and cardiac structures caudally, between the C4 and D8 vertebrae (Figs. 1 and 2).

Total thyroidectomy was performed through sternotomy together with thoracic surgery. Postoperative recovery transpired with no relevant complications, except transient hypoparathyroidism.

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