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Chronic Infectious Fibrinous Pleuritis Workshop topic #8

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MAYO CLINIC PULMONARY PATHOLOGY WORKSHOP

Chronic Infectious Fibrinous Pleuritis

Workshop topic #8



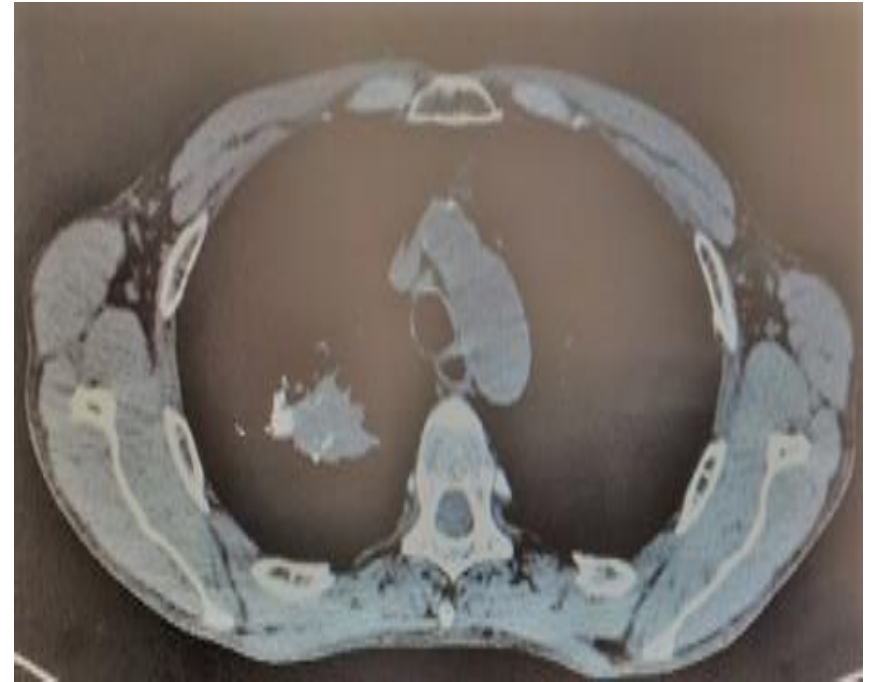
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Short Clinical History

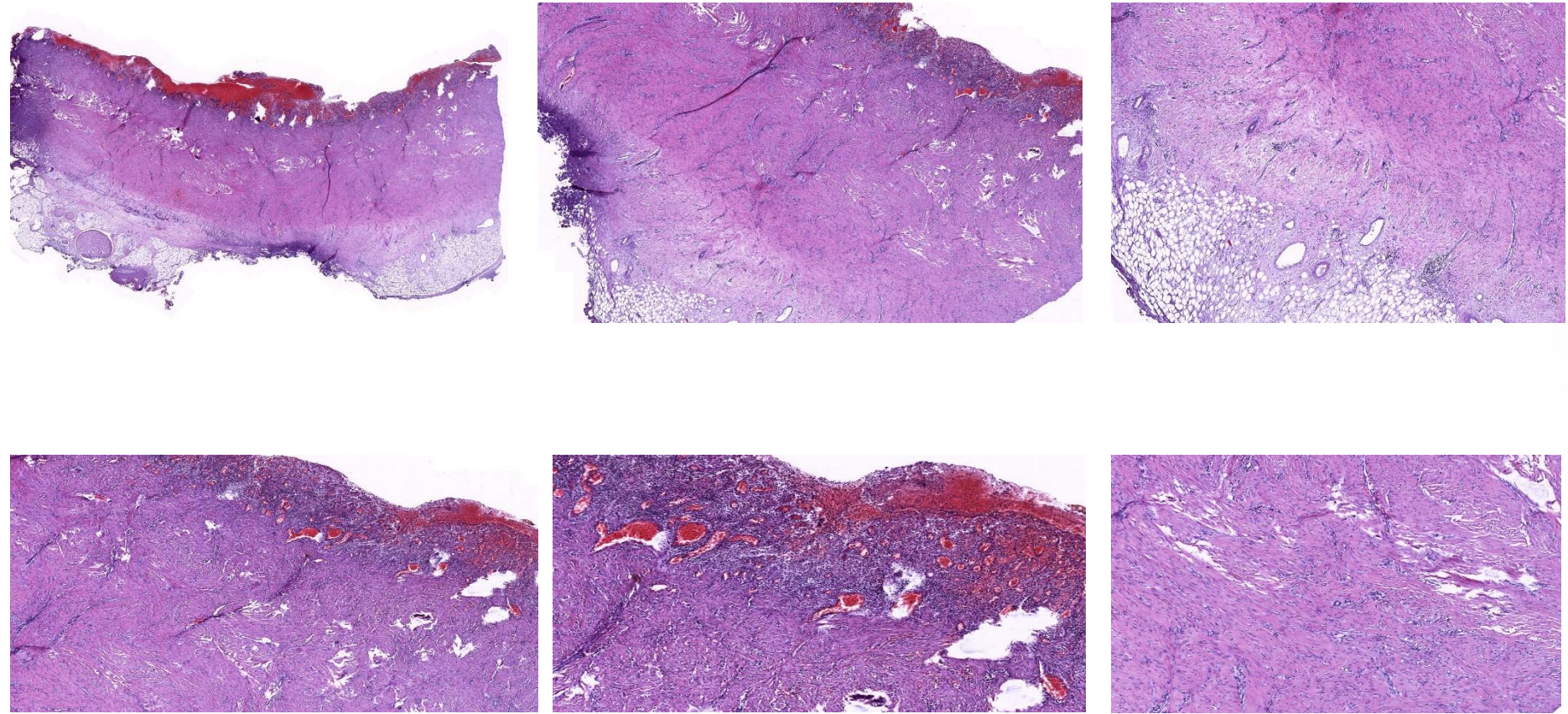
V.I a 61 years old patient, former smoker. Worked 30 years in a chemical factory. No heredocolateral history. Diagnosed at age 40 with pulmonary TB, received counseling and succesfully treated. Since then, constant negative bacteriological results. A few hospital admissions in the past for asthma exacerbations. Last month, referred to the unit of urgent admissions in pneumology, for exertional dyspnea, dry cough, fatigue, physical asthenia and night sweats, and because he has been experiencing these symptoms for over 7 months without an improvement in health, despite many treatments and because imaging was highly suggestive for pulmonary tumor, this time he was sent for a second opinion on the thoracic surgery section.

Radiographic Images

2016 vs 2017



Pathological Images



Samples provided courtesy of MD, PhD. T. Mezei, SPCJUMS, Department of Morphopathology

Final Diagnosis

- Right upper lobe pneumonia;
- Chronic infectious fibrous pleuritis;
- Chronic respiratory failure;
- Chronic bronchitis;
- Post tubercular sequelae;
- Partially controlled bronchial asthma step IV GINA;
- Mean obstructive ventilatory dysfunction;



Discussions: In november 2016, was initially diagnosed with bronchopulmonary tumor based mainly on X-ray + CT scan interpretation and correlated with laboratory results + symptoms. Now, in may 2017, after an exploratory thoracotomy, a biopsy piece from the lesion was harvested. Histopathological outcome was chronic infectious fibrous pleuritis.