Palpable lung cancer: Unusual manifestation of Lung Cancer
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Citation

Abstract

A 37 year old gentleman who had noted an anterior chest wall mass which had gradually increased over the past year. He had some discomfort at the site but no complaints of shortness of breath, cough, hemoptysis or wheeze. He had a weight loss of 20 lbs over the past year. He was a smoker. The mass was palpable on physical examination as a hard indurated structure fixed to skin and underlying muscle. There was no palpable axillary lymphadenopathy. The rest of his exam was normal.

A diagnosis of non small cell lung cancer (NSCLC) had been made 6 months earlier by transthoracic needle biopsy. The pathology was consistent with poorly differentiated carcinoma. He was treated with local radiation therapy and dual agent chemotherapy including paclitaxel and carboplatin. Unfortunately his tumour did not respond to any of these treatments. Below is a non contrast chest computed tomography scan image (Figure 1). The image shows obvious erosion of the NSCLC through the anterior chest wall into the subcutaneous tissue mimicking actinomycosis.

Figure 1
Figure 1: Noncontrast CT scan of chest showing an infiltrative left lung mass with erosion through the anterior chest wall into the subcutaneous tissue.

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References
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