

## HEMANGIOMA OF THE MEDIASTINUM\*

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THE OCCURRENCE OF hemangiomas in the mediastinum has not been too frequently reported in the past. A review of the literature by Seybold, McDonald, Clagett, and Harrington<sup>7</sup> in 1949 yielded 14 cases, to which they added three of their own. The following authors have also reported hemangiomas of the mediastinum:

1950 Thomas and Chesser <sup>8</sup>	1 case
1951 Horst and Beatty <sup>3</sup>	1 case
1952 Perasalo <sup>6</sup>	1 case
1953 Grimes, Raphael and Stephens <sup>2</sup>	1 case
1953 Keegan <sup>4</sup>	1 case
1953 Maurer <sup>5</sup>	1 case
1953 Emery and Doxiadis <sup>1</sup>	1 case

The case described in this paper is of a hemangioma of the left lower anterior mediastinum.

### CASE REPORT

A 23-year-old white male soldier was admitted to Tokyo Army Hospital in September, 1952, with an asymptomatic mass in the left anterior lower mediastinum which was discovered on a routine chest roentgenogram.

The physical examination was essentially negative. The lungs were clear to percussion and auscultation and routine laboratory studies were non-contributory. The blood serology was negative. Roentgenographic studies of the chest showed an oval, soft tissue mass 8 by 10 cm. in diameter in the left lower anterior mediastinum (Figs. 1 and 2). It was lying on the diaphragm, between the heart and the anterior chest wall and was thought to be a clear water pericardial cyst.

A left thoracotomy through a posterolateral approach was performed and an oval mass measuring 8 by 10 cm. in diameter was found lying on the diaphragm, anterior to the heart and left phrenic nerve. It was posterior to the chest wall and lateral to the mediastinum (Fig. 3), and was covered with mediastinal pleura. The mass was firm, did not pulsate, nor did it appear cystic. It was adherent to the diaphragm and mediastinum. A moderate-sized pedicle containing several blood vessels was found attached to the mediastinum. The tumor appeared to have a well-defined capsule. It was removed in its entirety without difficulty. The chest was closed in layers and drained with two intercostal tubes.

*Pathology.* Grossly, the tumor was a soft loculated mass measuring 8 by 10 cm. in diameter. A section through the tumor showed it to be made up of thin-walled spaces filled with blood. The entire mass was surrounded by a capsule.

Microscopic examination showed the tumor to be made up of large dilated blood-filled spaces, separated by thin fibrous septa. The blood-filled spaces were lined with a thin layer of endothelium and the entire tumor was surrounded by a capsule. There was no evidence of malignant degeneration (Fig. 4).

*Diagnosis.* Hemangioma.

The patient had an uneventful recovery and was discharged to full duty approximately one month after surgery. A checkup 18 months later showed the patient to be well and to have a negative chest roentgenogram.

### SUMMARY

A case of hemangioma of the left lower anterior mediastinum is reported. The tumor was removed in its entirety and the patient made an uneventful recovery. Histologic examination showed no evidence of degeneration.

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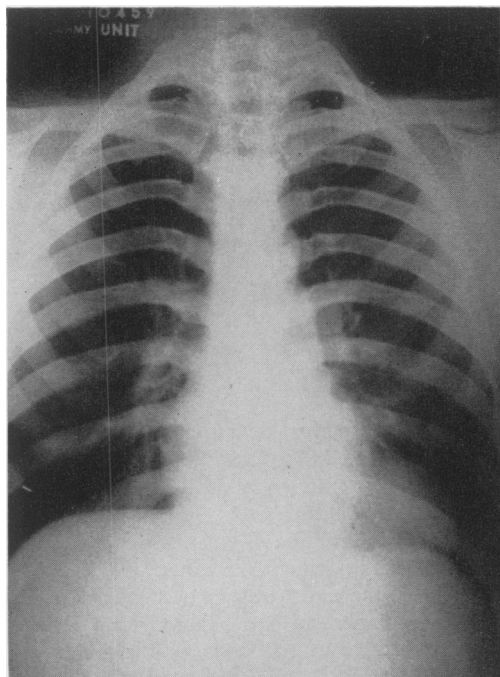


FIG. 1

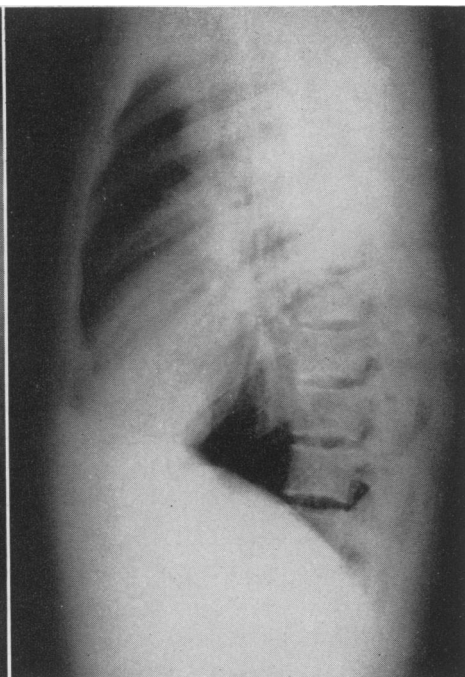


FIG. 2

FIG. 1. Posterior-anterior roentgenogram showing mass in the left lower chest.  
FIG. 2. Left lateral film showing mass in the lower anterior mediastinum.

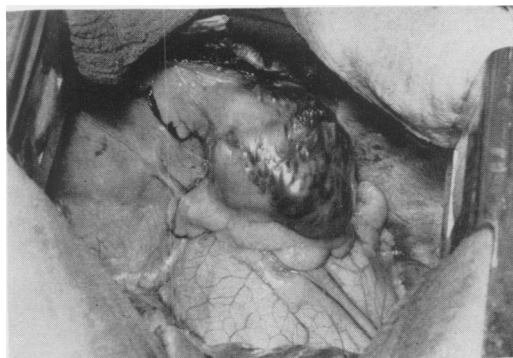


FIG. 3. Mass *in situ* before removal, located anteriorly to the heart and left phrenic nerve, posteriorly to anterior chest wall and lying on the diaphragm.

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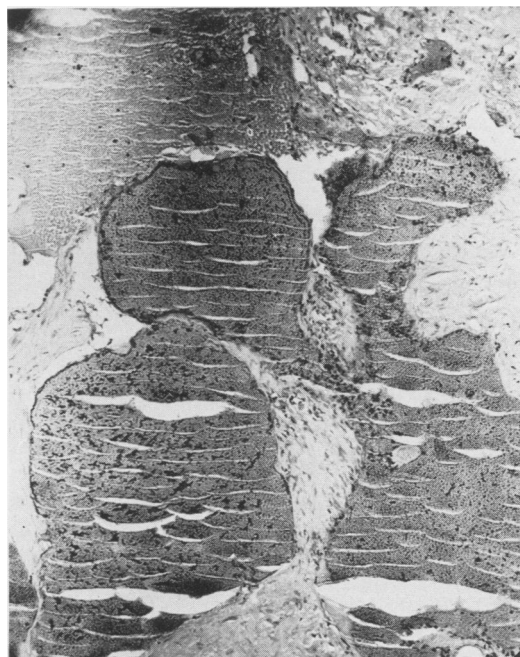


FIG. 4. Photomicrograph of specimen.

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