

AN UNUSUAL LOCATION FOR A LYMPH NODE

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We report a case of a 67-years old non-smoking woman who at the age of 24 years was diagnosed with hypertension complicated with chronic kidney disease and hypertensive heart disease. On CT-Chest scan an incidental discovery of a mass adjacent to the abdominal aorta was made. The initial diagnostic hypothesis of paraganglioma was not excluded by the subsequent MRI. Urine analysis showed normal Metanephrine with slightly elevated Chromogranin-A levels.

A VATs-procedure was performed which showed a "bulging" below the adventitial layer of the descending aorta

at the level of the diaphragmatic gutter. By opening the adventitia, a lipomatous lesion with a nodular, dense center was identified and excised.

Final histopathological report established the diagnosis of lymph node not suggestive of neoplasia.

Currently, 12 months after the surgery, the patient's condition is good being under surveillance in the Thoracosurgical Outpatient Clinic.

Despite no lifestyle changes and not having identified any neuroendocrine component, the patient had clinical signs of clear improvement of arterial hypertension

