Pleural Lipoma with unusual presentation

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Abstract

Pleural Lipomas are extremely rare benign slow-growing tumors of mesenchymal parietal pleura origin, which are usually asymptomatic, and discovered incidentally on plain chest radiograph, however the diagnosis is usually made by computed Tomography (CT). A case of Pleural Lipoma in 69 year old male, presented with persistent nocturnal cough. On examination the chest was clear, and no lymphadenopathy.

Past Medical History: Adult onset asthma, Obstructive sleep apnea, Dyslipidemia, Hypertension, and Gout

Allergies: ACE inhibitor cough.

Family History: Brother (RIP) had severe asthma, a second brother has it and 2 sisters.

Tobacco: Ex-smoker, last smoked 40+

Occupation: Previous furniture factory.

CT Chest 2017: Limited appearances are compatible with a benign pleural lipoma.

CXR 2018: Pleural based lipoma as previously characterised. No acute findings.

CXR 2023: Faint peripheral increased density within the right mid zone is unchanged when compared to the previous radiograph.

CT Chest 2024: Right-sided benign sub pleural lipoma at the right at the level of the 5-6 ribs measuring up to 6 cm, No other abnormalities.

PFT: Normal

Impression: after MDT discussion, it is a long standing right sided pleural lipoma, unchanged on interval scans over the last 7 years. Unlikely to require any further follow up.

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