

A Rare Tumor of the Thoracic Wall: Hibernoma: Original Image

Nadir Bir Göğüs Duvarı Tümörü: Hibernoma

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A 30-year-old man presented with a painless and soft mass which had been growing gradually for 2 years. The physical examination revealed a firm and mobile mass without any tenderness located in the left chest wall (Figure 1A). Computed tomography scan showed a 5x7x8 cm well-defined lobulated mass in the left infrascapular region, between fat and muscle attenuation (Figure 1B). Due to the heterogeneity of the lesion, a diagnosis of liposarcoma was initially considered but histologic examination of the ultrasound-guided needle biopsy of the lesion was revealed hibernoma. Hibernomas are rare, benign tumors of brown fat. The treatment comprises marginal excision, which is curative.¹ In our case, complete surgical excision was performed. Gross pathologic examination of the hibernoma demonstrated a well-vascularized, encapsulated, brown to yellow lobulated mass (Figure 1C). Histological examination showed lipid-containing tumor, mainly composed of multivacuolated cells (Figure 1D). At the 6-month follow-up, no recurrence was seen.

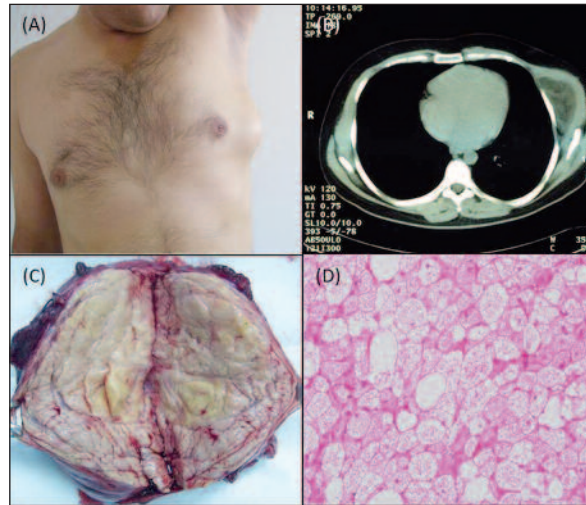


FIGURE 1: A) Firm and mobile mass without any tenderness located in the left chest wall. B) Thorax computed tomography showing a 5x7x8 cm well-defined lobulated mass in the left infrascapular region. C) Gross surgical specimen revealed an encapsulated, yellow-brown lobular mass. D) Microscopic image showing multi-vacuolated brown-fat cells with some scattered white adipocytes (HE, x200).

REFERENCE

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