

: 1 1

1

(primary pulmonary plasmacytoma)

가

skeletal survey

(1).

1

sis)

(immunoelectrophore-

(extramedullary plasmacytoma)

57

가

가

322

84%

1993

(upper res-

piratory tract)

(1).

1944

protein 7.6g/dl, albumin 4.5g/dl

가

6cm

Gordon Walker(2)

(plasma cell granulo-

가

(Fig.1),

(chest CT)

ma)

(3).

(apicoposterior segment)

가

polyclonal plasma cell granuloma

monoclonal plas-

macytoma

가

(4,5).

가

(Fig.2).

Geetha (1)

19

42.3

(3-72)

가 3-5:1

6×4.5×3 cm

가

50

가 (1,6).

Kanji (7)

가

가

, CT MRI

(mature plasma cell)

가

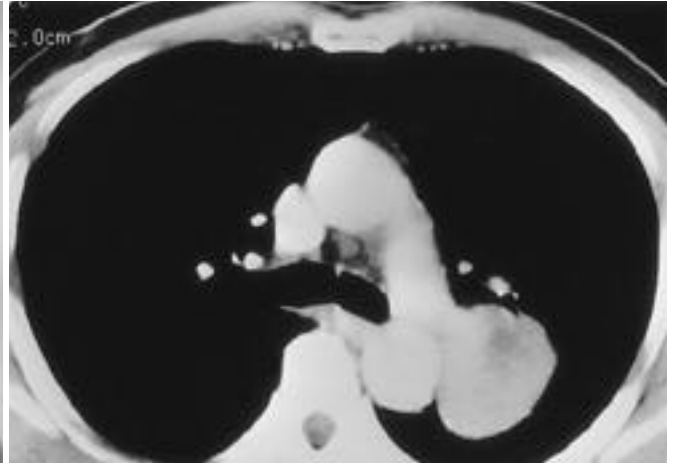
CT MRI

lambda light chain

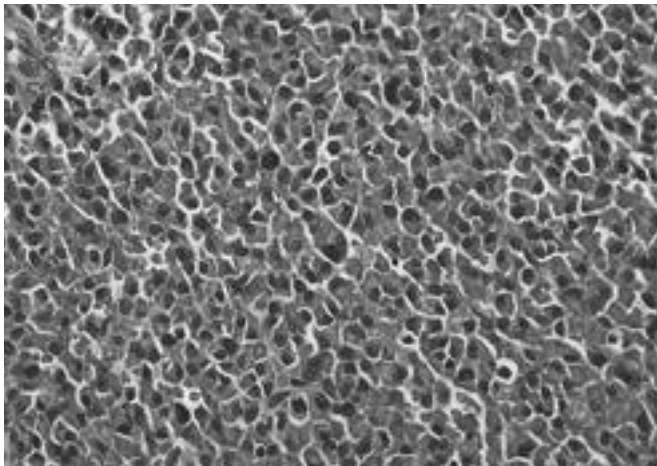
kappa light chain



A



B



C

Fig. 1. 57-year-old man with primary pulmonary plasmacytoma
A. Chest radiograph shows a 6x6 cm sized well-defined soft tissue mass at the left hilar area
B. CT scan obtained after injection of intravenous contrast media shows the well-defined mass at the left hilar area
C. Photomicrograph of the specimen shows numerous plasma cells packed in a loose connective tissue (H&E X300)

가
(multiple myeloma)
가
가
(1).
(solitary
bone plasmacytoma)
(7).

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Primary Pulmonary Plasmacytoma: A Case Report¹

You Me Kim, M.D., Seung Cheol Kim, M.D.

¹*Department of Radiology, Dankook University Hospital*

Primary pulmonary plasmacytoma (PPP) is extremely rare. Because of its rarity, PPP may present a diagnostic challenge to the radiologists and there is a little information on the diagnosis and treatment of this condition. We report on a patient with PPP presenting with a left hilar mass on chest radiograph and CT scan. The diagnosis was confirmed by immunohistochemical study of the resected specimen.

Index words: Plasmacytoma
Lung neoplasms, CT

Address reprint requests to : Seung Cheol Kim, M.D., Department of Radiology, Dankook University Hospital.
#29, Anseodong, Chonan, Choongnam, 330-715, Korea.
Tel. 82-417-550-6921, Fax. 82-417-552-9674