

: 1 1

(Pleuropulmonary blastoma, PPB)

5

CT

CT

1988 Manivel et al (1)

가 (Fig. 3A).

가

(Fig. 3B).

3 cm

(Fig. 3C),

CT

(1 - 6).

(epitheloid cell)

(mesenchymal tissue)

10

3 가

5

AFB

가

(Fig. 1).

4

(Fig. 2).

puted tomography, CT)

(com -



Fig. 1. Chest radiograph shows a large, homogenous mass occupying the right lower thorax.

2002 1 24

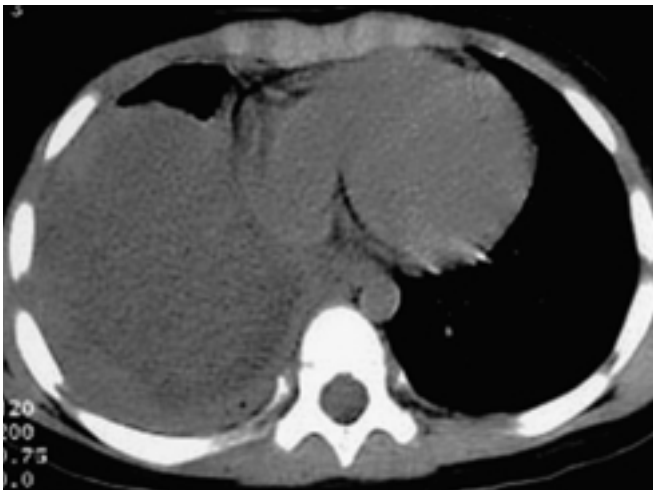
2002 8 6

가
9×8.5×4.5 cm
가
(Fig. 4A).
(stromal)
(epitheloid) 가
(Fig. 4B).
가
가

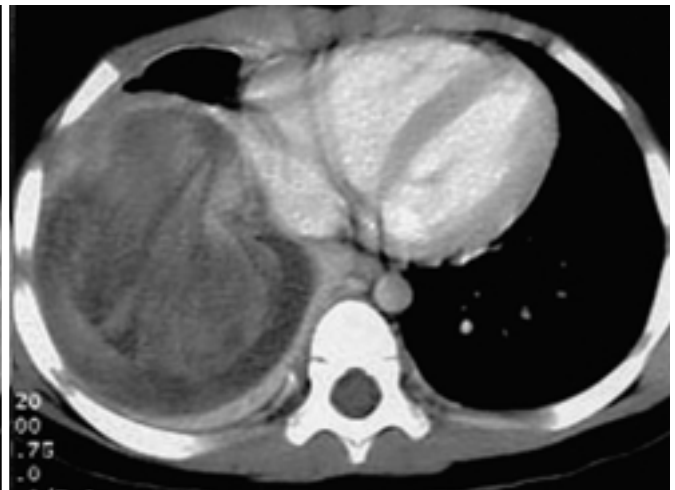
(inflammatory pseudotumor) ,
(bronchial carcinoid),



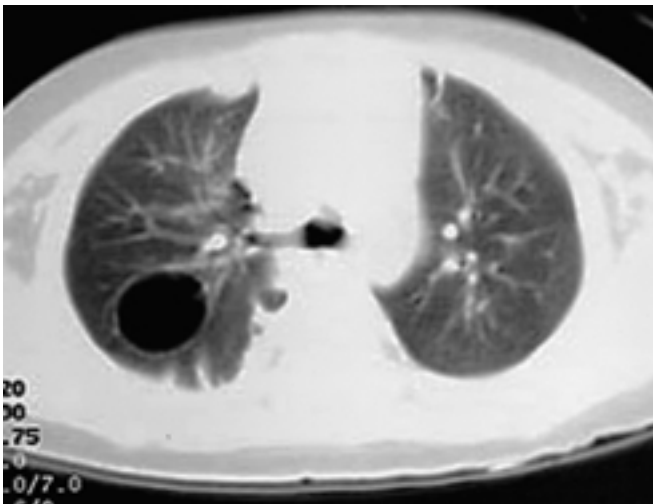
Fig. 2. Ultrasonography shows a heterogeneous echogenic mass with a several small cysts (arrow) in the right lower thorax, and diffuse pleural thickening.



A



B

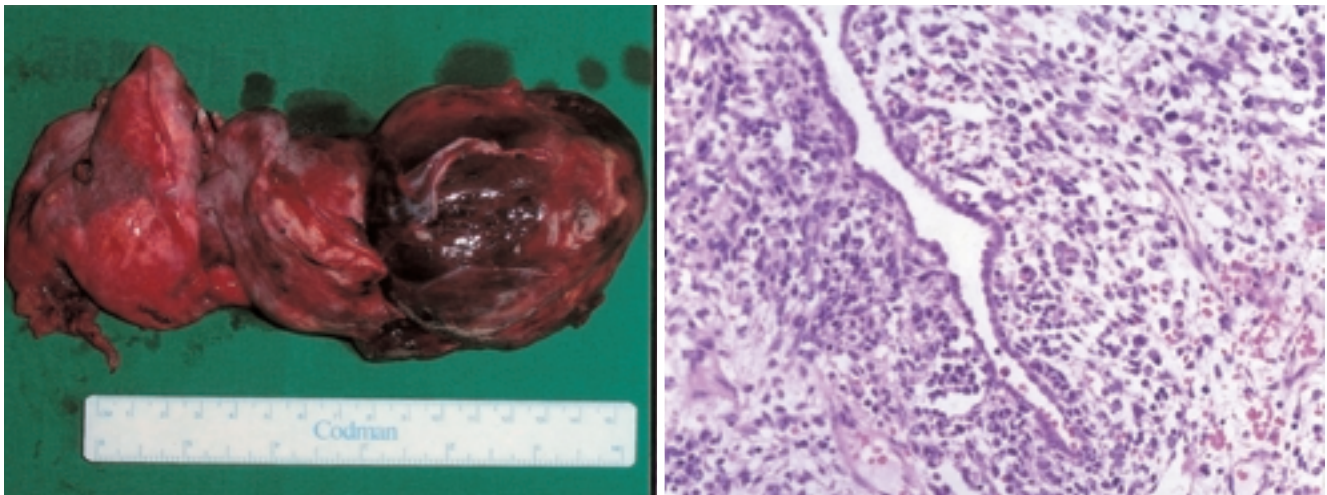


C

Fig. 3. A. Unenhanced CT scan at lower thoracic level shows a large, solid mass with heterogenous attenuation and diffuse pleural thickening.

B. Contrast-enhanced CT scan shows a mass with interspersed areas of low and high attenuation, producing a whorled appearance.

C. CT scan at carina level in lung setting shows a lung cyst in the right upper lobe.



A
Fig. 4. A. Gross specimen shows a 9 × 8.5 × 4.5 cm, dumbbell-shaped, dark-red mass.
B. Photomicrograph (× 1000) shows both components of malignant stromal and benign epithelial cells.

(Congenital cystic adenomatoid malformation, CCAM),
(pulmonary sequestration) . PPB
(2, 7, 8).
(Pulmonary blastoma, PB)
,
. 1988 Manivel (1)
,
,
,
PB PPB
가 (4, 8). PPB
,
,
PB
(epithelial differentiation)
,
(mesenchymal)
(cystic malformation)
PB
30 , 80%가
,
,
,
(stroma)
(epithelium)
(2, 5).
PPB 5
,
(2, 5).
4 -
,
,
,
,
(3, 5, 9). 가
,
(9). 가 5
cm
가 (4, 10). Romeo (9) 1
, 10
PPB
(4). Manivel (1) PPB
가
PPB
Kukkady (2) PPB가
가
가
CT
(4).
CT
(whorled appearance)
, PPB

PPB가

PPB

가
CT

PB

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Pleuropulmonary Blastoma: A Case Report¹

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Primary pulmonary neoplasms are uncommon in children. One such tumor, pleuropulmonary blastoma (PPB), is very rare, highly aggressive and malignant, and originates from either the lungs or pleura. It contains both mesenchymal and benign epithelial elements that resemble fetal lung, and occurs mainly in children aged less than five. The clinical symptoms often suggest upper respiratory tract infection or pneumothorax, but ultrasonography and chest CT scans depict both a large mass occupying an almost entire hemithorax, and a simple lung cyst. Contrast-enhanced CT demonstrates heterogeneous attenuation and a whorled appearance.

Index words : Lung neoplasms, CT
Neoplasms, in infants and children

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