

Giant Mediastinal Mixed Germ cell tumor, a rare case report and review of literature

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Abstract

Introduction:

Germ cell tumors are relatively rare, embryologically derived from reproductive cells usually arise in the gonads. Mediastinal germ cell tumor estimated about 1-3 % of all germ cell tumors, generally seen in the anterior mediastinum and the metastatic lesions are mostly seen in the posterior mediastinum. The most aggressive germ cell tumor subtypes are choriocarcinoma, embryonal carcinoma and yolk-sac tumors. While seminomas only very rarely spread distantly. The presentations vary ranging from accidental findings on routine radiography to life-threatening respiratory and cardiovascular compromise, can also present as gigantic big intrathoracic germ cell tumor like our case.

Case report:

30 years old male patient, not known to have any chronic illness, referred from TB hospital center because history of dyspnea, cough and loss of appetite with weight loss for more than 4 months, no history of chest pain or hemoptysis. Chest x-ray done and showed complete obliteration of the right side of thorax, was suspected pleural effusion and diagnosed as case of pleural TB and empyema, started on ant tuberculosis drugs, antibiotics and received chest drain with a little bloody fluid. Patient not improved and referred to our hospital, Computed hospital of chest with contrast revealed a very big mass obliterating the right side of chest, pushing the trachea and mediastinum to the left side with minimal effusion in both sides. Pleural US revealed mass and effusion but no empyema. Differential diagnosis was mediastina mass, adenocarcinoma, thymic carcinoma, lymphomas, fibroma or fibrosarcoma. US guided transthoracic fine needle biopsy from the right side mass revealed mixed germ cell tumor. The patient's condition had rapidly deteriorated prior the confirming the diagnosis or starting with treatments and died because of difficult airway breathing due to deviated and compressed airway and possible pneumothorax after transthoracic biopsy.

Conclusion:

Germ cell tumors are aggressive and rapidly growing cancers, the previous literature reported the nature of the extragonadal mediastinal germ cell tumor can appear as Giant mass occlude whole lung, compressing the great vessels, adherent to chest wall, pericardium, and lung, like our case and this make a worse prognosis, The estimated event-free survival at 10 years after combined treatment is 80.4%. Chemotherapy, debulking and pneumectomy are the treatment for such cases.



Biography:

Dr. Abdulrahman Hakami Assistant professor of Medicine in Jazan University, Saudi Arabia Researcher in Amsterdam University, The Netherlands. He did the speciality of internal medicine and respiratory diseases in Sweden. And has completed a clinical and research fellowship in interventional pulmonology and interstitial lung diseases at Amsterdam University, the Netherlands. He interested in research about lung cancer, Mycobacterial tuberculosis and Interstitial lung diseases. He has reviewed a lot of manuscripts in different journals. Editors in BMC and BMJ journals

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