



Asymmetric and Nodular Pleural Thickening - Not Always a Mesothelioma!

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Clinical image description

A 65-year-old male with extensive history of tobacco use (50-pack-year) presented with progressively worsening shortness of breath and cough. He worked in a factory where he was involved in grinding metals. In addition, he reported possible exposure to asbestos in the past at a previous job. Computed Tomography (CT) chest with contrast showed asymmetric nodular thickening of pleura, along with parenchymal nodules, most prominently involving the right upper along with mediastinal and lymphadenopathy (Figure 1). The asymmetric and nodular pleural involvement on imaging was highly suspicious of mesothelioma. We did an endobronchial ultrasound-guided fine needle aspiration (EBUS-FNA) biopsy of the right paratracheal node which revealed adenocarcinoma of the lung. This case illustrates the uncommon presentation of lung adenocarcinoma with extensive pleural thickening in a smoker.



Figure 1



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