

张岳,张金娥,赵振军,刘再毅,吴政光,梁长虹.支气管腔内息肉样生长中央型肺癌的CT表现[J].中国医学影像技术,2012,28(11):2007-2010

支气管腔内息肉样生长中央型肺癌的CT表现

CT findings of central lung cancer with endobronchial polypoid growth

投稿时间: 2012-05-03 最后修改时间: 2012-10-07

DOI:

中文关键词: [肺肿瘤](#) [支气管内息肉样生长](#) [体层摄影术,X线计算机](#)

英文关键词: [Lung neoplasms](#) [Endobronchial polypoid growth](#) [Tomography, X-ray computed](#)

基金项目:

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中文摘要:

目的 探讨支气管腔内息肉样生长中央型肺癌CT表现。方法 回顾分析9例经病理证实的支气管腔内息肉样生长中央型肺癌的临床、病理及CT资料。结果 9例中,肿瘤位于左肺3例,右肺6例,其中上叶6例,中叶1例,下叶2例;CT显示病灶位于单或多段支气管及其分支腔内,呈不规则息肉样改变,近肺门侧粗大,远端细小,局部管径移行变化急剧;平扫病灶密度较均匀,CT值27~48 HU,中位数42 HU,仅1例内见斑点状钙化;增强后均呈轻-中度欠均匀强化,CT净增值约25 HU;4例邻近肺动脉主干或分支明显受包绕;7例合并肺门和(或)纵隔淋巴结肿大,其中1例合并颈部淋巴结肿大;5例出现肺内转移,其中1例伴局部胸膜转移。病理结果显示中/低分化鳞癌5例,类癌3例,小细胞肺癌1例。结论 中央型肺癌可表现为支气管腔内息肉样特殊生长方式,可能与肿瘤组织病理学类型、分化程度无关;其CT表现具有明显特征,综合分析可明确诊断。

英文摘要:

Objective To explore CT features of central lung cancer with endobronchial polypoid growth. **Methods** Clinical, pathological and CT data of 9 patients with central lung cancer with endobronchial polypoid growth were analyzed retrospectively. **Results** The lesion located in the left lung in 3 and right lung in 6 patients (upper lobes in 6, middle lobe in 1, and lower lobes in 2). The tumors filled one or more segments of bronchi with polypoid appearance. The proximal part of the lesion near lung hilum showed bulky, the distal part showed tiny, and the local pipe diameter changed sharply. Plain CT showed uniform soft tissue density, with CT value ranged from 27 to 48 HU (median value 42 HU). Calcifications were found in only 1 patient. On contrast-enhanced CT, the lesions showed mild to moderate enhancement, with an average increased value of 25 HU. Nearby main pulmonary arteries or branches were invaded in 4 patients. Swelling lymph nodes in lung hilum or mediastinum were found in 7 patients, 1 of which had swelling lymph nodes in the neck. Pulmonary metastases were found in 5 patients, 1 of which had pleural metastases. Pathological results proved that there were 5 moderate/low differentiated squamous cell carcinomas, 3 carcinoids and 1 small cell lung cancer. **Conclusion** Central lung cancers can manifest as special growth pattern of endobronchial polypoid, which may have no relation to histopathological types and differentiation degree of tumors. Central lung cancer with endobronchial polypoid growth has specific CT features, and can be preoperatively diagnosed through comprehensive analysis.

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