Primary Neurofibroma of Diaphragm
1 case report

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Primary tumors of the diaphragm are very rare. From a clinical point of view, they do not present a specific symptomatology and the radiologic aspect is not characteristic. Their etiology is often obscure.

The authors experienced one case of primary neurofibroma of the diaphragm.

The patient was 52 year old male, and detected preoperatively abnormal round mass shadow in the middome portion of the left diaphragm in routine chest X-ray.

A left posterolateral thracotomy through the 7th I.C.S. was performed.

The mass and surrounding tissues were completely removed, and diagnosed as a primary neurofibroma by the histopathologic findings.

Postoperative course was unevental.
Fig. 1. Preoperative chest P-A and left lateral view: An about 5cm sized soft tissue mass like density in left mid lung base with preservation of left diaphragmatic border.

Fig. 2. Preoperative bronchogram(left): No abnormal findings in opacified segmental and subsegmental bronchi of left lower lobe. Well visualization of soft tissue mass based on left diahragram.
Fig. 3. Chest C-T:
Well defined and homogenously contrast enhanced soft tissue mass lesion (3x5x7 cm) arising in the mid-dome of the left diaphragm.

Fig. 4. Operative Field View:
After left 7th posterolateral thoracotomy, Egg-sized, whitish gray color, relatively formed nodular mass arising in the mid-dome of the left diaphragm.

Fig. 5. Resected specimen:
Mass (3x5x7 cm) implanted broadly base on diaphragm and protruded mass (2x5x7 cm) formation below diaphragm.

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Fig. 6. Histopathologic findings:
There is characteristic well-circumscribed cellularity tumor, and tumor cells revealed palisading arrangement and collagen product.
REFERENCES