

Hydatid cyst is an endemic public health problem in our country. While it often develops in lungs and liver, it may also affect all tissues. Extrapulmonary intrathoracic hydatid cyst is rarely seen as the involvement of thoracic wall, mediastinum, pericardium, myocardium, fissure and pleural cavity. Mediastinum involvement by hydatid cyst is quite rare (0.1%-0.5%) [1].

A 56-year-old male patient had complaints of chest pain and coughing. No specific features were detected in his personal medical history. His chest radiograph revealed an evenly bordered opacity in the left hilar region and bronchiectatic areas were in left lower zone (Image 1) and his thoracic tomography revealed a 5.5 x 4.5 cm hydatid cystic lesion of which wall had calcifications and lumen contained collapsed membranes (Image2-5). Mediastinal MR imaging of the identified lesion supported the finding of a hydatid cyst as well (Image6-7). Abdominal ultrasound was normal. The patient underwent surgery. The case was reported as hydatid cyst.

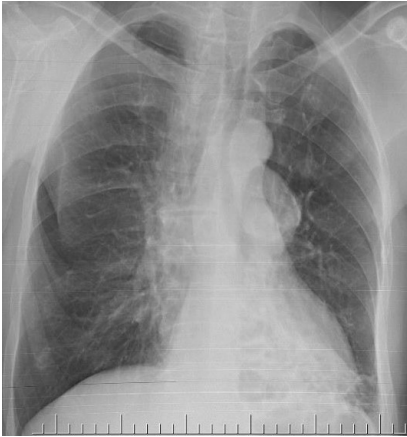


Image 1. Chest radiograph opacity in the left hilar region



Image 2. 5. Thoracic tomograph 5.5 x 4.5 cm hydatid cystic lesion



Image 4.



Image 5.

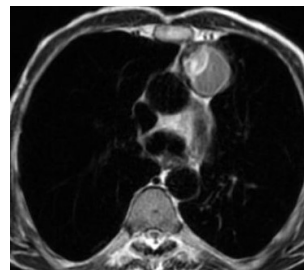
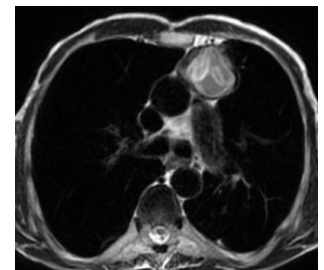


Image 6. 7. Mediastinal MR hydatid cys



Reference

1. Özyurtkan MO, Koçyiğit S, Çakmak M, Özsoy İE, Balcı AE. Case Report: Mediastinal Hydatid Cysts. Türkiye Parazitol Derg 2009; 33:179 -181.