

# Case of the day : Case 6 - CHEST

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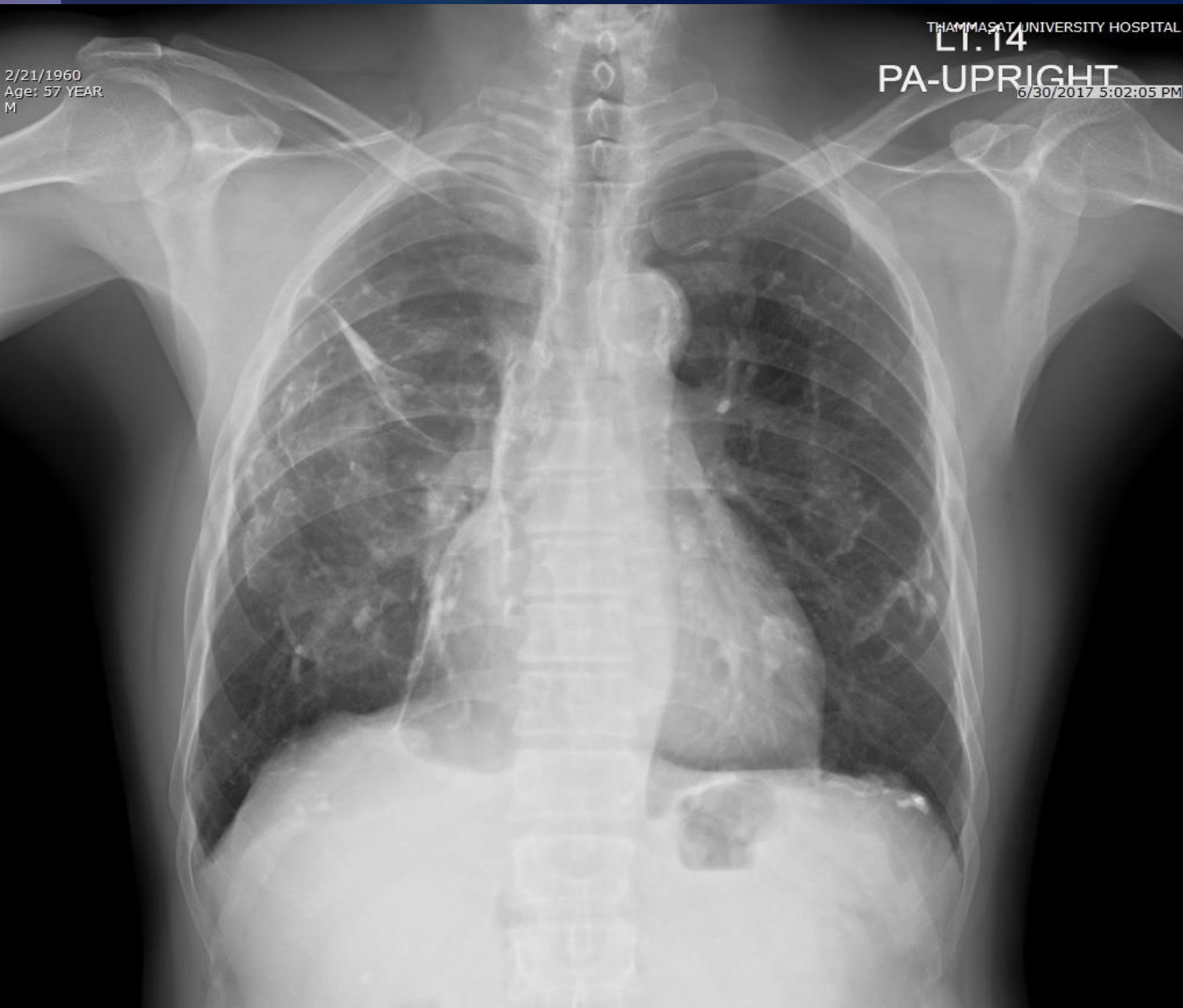
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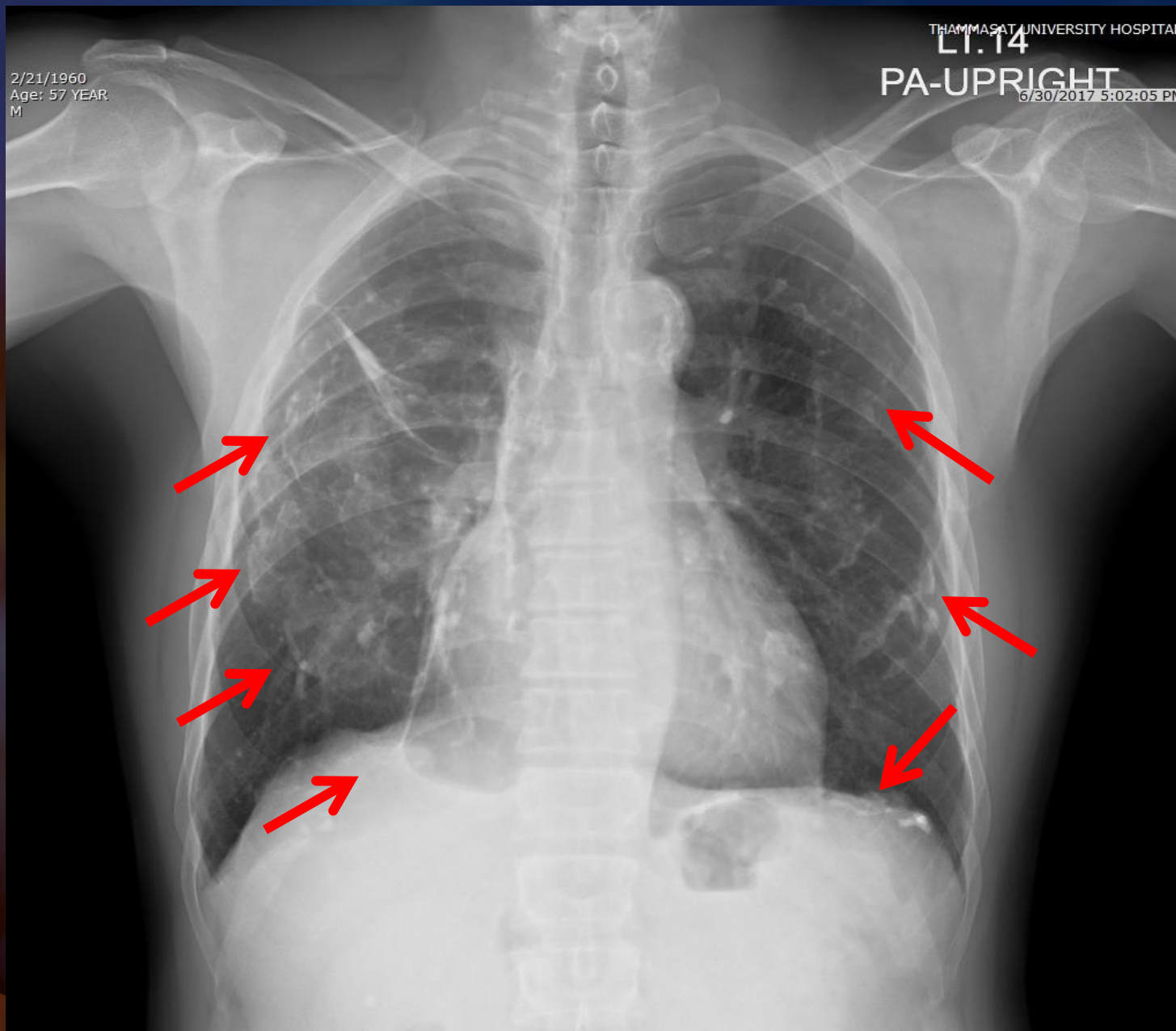


## Case of the Day: Chest



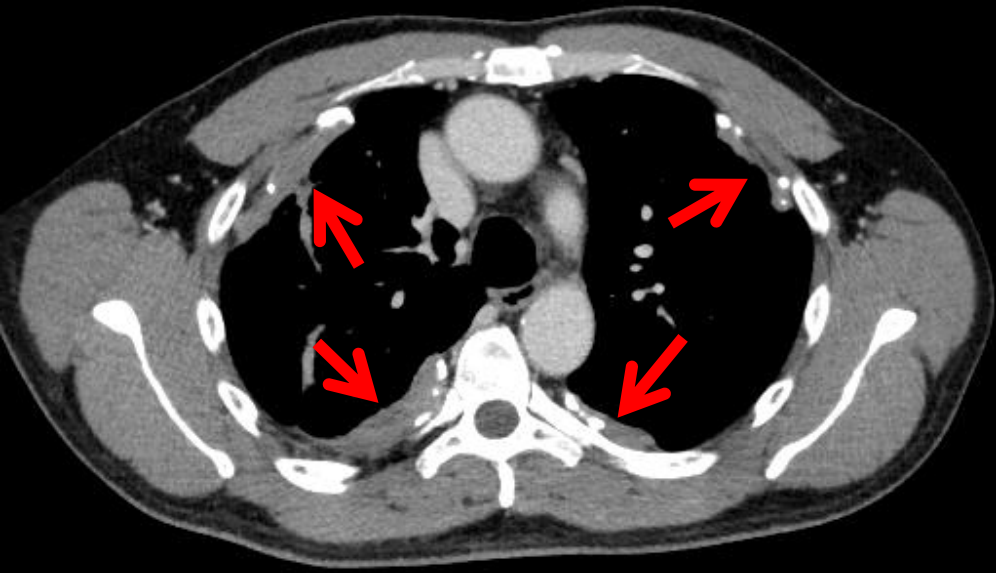


- What is the most likely diagnosis?
  - A. Old granulomatous infection
  - B. Pulmonary glue embolism
  - C. Occupational lung disease**
  - D. Fibrous dysplasia of ribs
  - E. S/P talc pleurodesis



## FINDINGS

The PA chest radiograph shows irregular, geographic areas of calcification (red arrows) at both hemithorax and along both domes of diaphragms. The costophrenic angles and apices are spared.



## FINDINGS

Chest CT of the same patient shows calcified, mesa shaped pleural plaques (red arrows) at the anterolateral and posterior aspects of bilateral hemithoraces and domes of the diaphragm.

# Asbestos-related pleural plaques

- The most common manifestation of asbestos exposure
- Usually develop 10-20 years after exposure
- Generally affect the parietal pleura
- Frequently seen overlying the ribs in the posterolateral thorax and in relation to the domes of the diaphragm
- Usually bilateral
- Tend to spare the apices and costophrenic angles
- Chest radiographs: calcified in 10%-15% of cases, irregular and geographic shaped
- CT: calcified in 15-20% of cases, mesa shaped, often appear as high attenuation



# References

1. Webb WR, Higgins CB. Thoracic imaging pulmonary and cardiovascular radiology. 3rd ed. Philadelphia: Wolters Kluwer;2017
2. Roach HD, Davies GJ, Attanoos R, et al. Asbestos: When the dust settles-An imaging review of asbestos-related disease. Radiographics 2002;22:S167-84
3. Kim KI, Kim CW, Lee MK, et al. Imaging of occupational lung disease. Radiographics 2001; 21:1371-91

