



Images In Medicine

An Incidental Finding On Plain Film Prompting the Diagnosis of Castleman's Disease

Jennifer Yates, MD, and Harry Iannotti, MD

A 49 year old otherwise healthy woman presented to her chiropractor with chronic back pain. As part of her evaluation, she underwent a plain film showing the findings below. Subsequent evaluation included CT of the abdomen showing a calcified soft tissue mass. A biopsy revealed small fragments of lymphoid tissue with mildly increased vascularity and increased plasma cells. She underwent exploratory laparotomy and excision of the mass, with the final pathological diagnosis of Castleman's disease (CD).

First described in the 1950s, CD can be described histologically as plasma cell variant and hyaline vascular variant. The hyaline vascular subtype is composed of multiple germinal centers with few plasma cells, while the plasma cell variant consists of continuous sheets of plasma cells. The degree of calcification within these lesions vary, but can be quite dramatic as seen in this patient. The differential diagnosis includes pheochromocytoma, lymphoma, sarcoma, and other vascular tumors.

Castleman's disease can be multicentric or unicentric. Multicentric disease usually portends a worse prognosis with systemic symptoms and a chronic clinical course. Surgical debulking for multicentric disease is often unsuccessful. Unicentric disease occurs in a younger population and is often surgically resectable; long-term outcomes are favorable. Medical

adjuvant treatments vary, ranging from chemotherapeutic agents to radiation. High dose steroids have also been used with variable success. Mortality of combined medical and surgical modalities in multicentric disease is high.

In conclusion, a plain film showing a calcified retroperitoneal mass led to the diagnosis of CD, with excellent early surgical and clinical outcomes.

REFERENCE

Bowne WB, Lewis JJ, et al. The management of unicentric and multicentric Castleman's disease. *Cancer* 1999;85:706-17.

Jennifer Yates, MD, is a Resident in Urology, The Warren Alpert Medical School of Brown University.

Harry Iannotti, MD, is Clinical Assistant Professor of Urology, The Warren Alpert Medical School of Brown University.

Disclosure of Financial Interests

The authors have no financial interests to disclose.

CORRESPONDENCE

Jennifer Yates, MD
e-mail: yatesnif@aol.com

