Endobronchial Resection of Mucoepidermoid Carcinoma (MEC) of the Trachea in a Pregnant Woman: Case Report

Liliana Fernández MD1, Luz F. Sua MD, PhD2
1Interventional Pulmonology, 2Department of Pathology, Laboratory Medicine and Biomedical Sciences. Fundación Valle del Lili, Group of Biomedical Research in Thorax, Universidad ICESI, Cali-Colombia

Background

The (MEC) of the trachea is a rare tumor of low grade malignancy, with an incidence of 0.22%, its origin is in the tracheobronchial glands. It is more common in young people. The CME form polyloid lesions in the trachea, treatment is usually surgical. We report a case of a pregnant woman who presented with progressive dyspnea and chest pain, endoscopic resection of the lesion was performed with Argon Plasma Coagulation (APC) and electro coagulation.

Results

This is a 22 year old with 17 wk of pregnancy with history of asthma, who consults several times to the emergency department with progressive dyspnea, without improvement with inhaled bronchodilators, along with oppressive chest pain. In the physical examination found normal vital signs, had no alterations in the neck, no murmurs or gallops were found in the heart, had normal breath sounds without wheezing or crackles. His chest X-ray was normal. We think that she could have a pulmonary embolism by the clinical picture, the chest x-ray without changes and pregnancy, then a CT angiography of the chest was made, identify endotracheal lesion occluding 80% of the tracheal lumen, which is management with endoscopic resection APC and electrocoagulation under general anesthesia with spontaneous ventilation without complications. The diagnosis was CME trachea, had complete relief of symptoms, continuing pregnancy without complications. Pathology: an expansive lesion, covered by squamous epithelium, composed of glands with mucin lakes. Positive expression for cytokeratin AE1/AE3. Cell proliferation index assessed with the Ki-67 of 30%.

Methods

We review the clinical history data

Conclusions

Mucoepidermoid carcinoma of the trachea are rare lesions that require surgical resection as definitive management in this case a complete endoscopic resection is performed by electrosurgery and APC, the nature of low-grade and slow tumor growth monitoring conduct long-term

Bibliography


CT of mucoepidermoid tumor in trachea, FBO before and after endoscopic resection

A, B. expansive lesion covered by squamous epithelium, composed of glands with mucin lakes (H & E). C. Positive expression for cytokeratin AE1 / AE3 (IHC). D. cell proliferation index measured with Ki-67 30% (IHC).