Pleural effusion as a first manifestation of breast cancer

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A 87-year-old woman was admitted to our hospital with a history of increased dyspnoea. On physical examination the patient was distressed with an elevated respiratory rate of 28 breaths / min. Chest X-ray demonstrated an extensive left pleural effusion (A). Her arterial blood gas showed a paO2 of 7.11 kPa and a paCO2 of 4.81 kPa. Further laboratory investigations showed no other abnormalities. Pleural aspiration showed an exudate with elevated LDH of 163 U/L (0-100 U/L). The diagnostic thoracoscopy confirmed the diagnosis of a malignant effusion and metastases on the pleura visceralis and parietalis (C) and a pleurodesis was performed after obtaining multiple biopsies. Immunohistochemical staining revealed a metastatic carcinoma of the breast to the pleura with estrogen receptor positivity in the islands of tumor cells (D). Six weeks later a follow up chest X-ray demonstrated the successful procedure of pleurodesis with talcum (B).

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