



CLINICAL CASE PRESENTATION

Prof. Dr. ErdoĐan etinkaya

- **History of Patient & Present Illness**

- 59 year-old, female patient
- Referred to our clinic with lymphadenomegaly was observed in the thorax CT which performed as a result of application to the committee for disability.
- She had no respiratory complaints.

- **History**

- Smoking history: Never used.
- Occupation: Housewife
- Diagnosed with Asthma, Hypothyroidism and DM
- Drugs used: Seretide 50/500 2*1, Euthyrox 75mcg 1*1, Oral antidiabetic drugs

- **Family history:** No known family history of disease

- No known environmental or occupational exposure.

Physical Examination

- BMI: 24,5 kg/m²
- SpO₂: 99 %
- HR: 90/min
- RR: 18 /min
- BP: 115/89

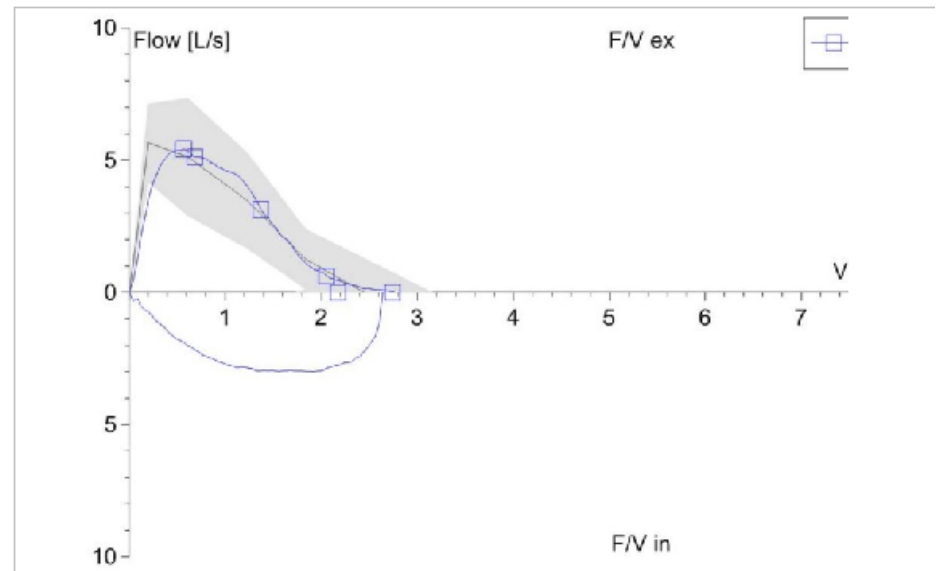
- Normal respiratory sounds.
- Clubbing (-) PTE (-/-)

- Other system examinations are normal.

PFT (29.11.2023)

- FVC: 2,58 (%100)
- FEV1: 2,14 (%99)
- FEV1/FVC: (%83)

- S.F.T.--	Pred	Pre	%Pre/Pred
- S.F.T. - FVC	2.44	2.74	112.26
- S.F.T. - FEV 1	2.05	2.17	106.03
- S.F.T. - FEV1%F	77.89	79.17	101.65
- S.F.T. - PEF	5.65	5.42	96.01
- S.F.T. - MEF 75	5.12	5.12	100.08
- S.F.T. - MEF 50	3.48	3.14	90.31
- S.F.T. - MEF 25	1.26	0.61	48.32
- S.F.T. - MMEF	2.85	2.10	73.74
- S.F.T. - FEV3%E	94.02	94.15	100.13
- S.F.T. - FEV1%6			
- S.F.T. - FEV6			
- S.F.T. - FET		4.90	
- S.F.T. - FIV1		2.44	
- S.F.T. - FIV1%F		92.95	
- S.F.T. - FEF 25	5.12	5.12	100.08
- S.F.T. - FEF50%		114.70	
- S.F.T. - PIF		3.02	



LABORATORY RESULTS

Complete Blood Count

Tetkik	Sonuç	Unite	Referans Değerler
Tam Kan (Hemogram)			
WBC	6.84	10e3/uL	4 - 10
RBC	4.82	10e6/uL	3.5 - 5.5
HGB	13.6	g/dL	11 - 16
HCT	41.5	%	37 - 54
MCV	86	fL	80 - 100
MCH	28.2	pg	27 - 34
MCHC	32.8	g/dL	32 - 36
RDW-CV	14.3	%	11 - 16
RDW-SD	43.6	%	35 - 56
PLT	191	10e3/uL	150 - 450
PCT	0.21	%	0.108 - 0.282
MPV	10.7	fL	6.5 - 12
PDW	16.3		9 - 17
LY#	1.19	10e3/uL	0.8 - 4
MO#	0.34	10e3/uL	0.12 - 1.2
NE#	5.27	10e3/uL	2 - 7
EO#	0.02	10e3/uL	0.02 - 0.5
BA#	0.02	10e3/uL	0.00 - 0.10
LY%	17.4	%	10 - 50
MO%	5	%	3 - 12
NE%	↑ 77	%	50 - 70
EO%	↓ 0.3	%	0.5 - 5.0
BA%	0.3	%	0.0 - 1.0
NE# / LY#	4.43	10e3/uL	

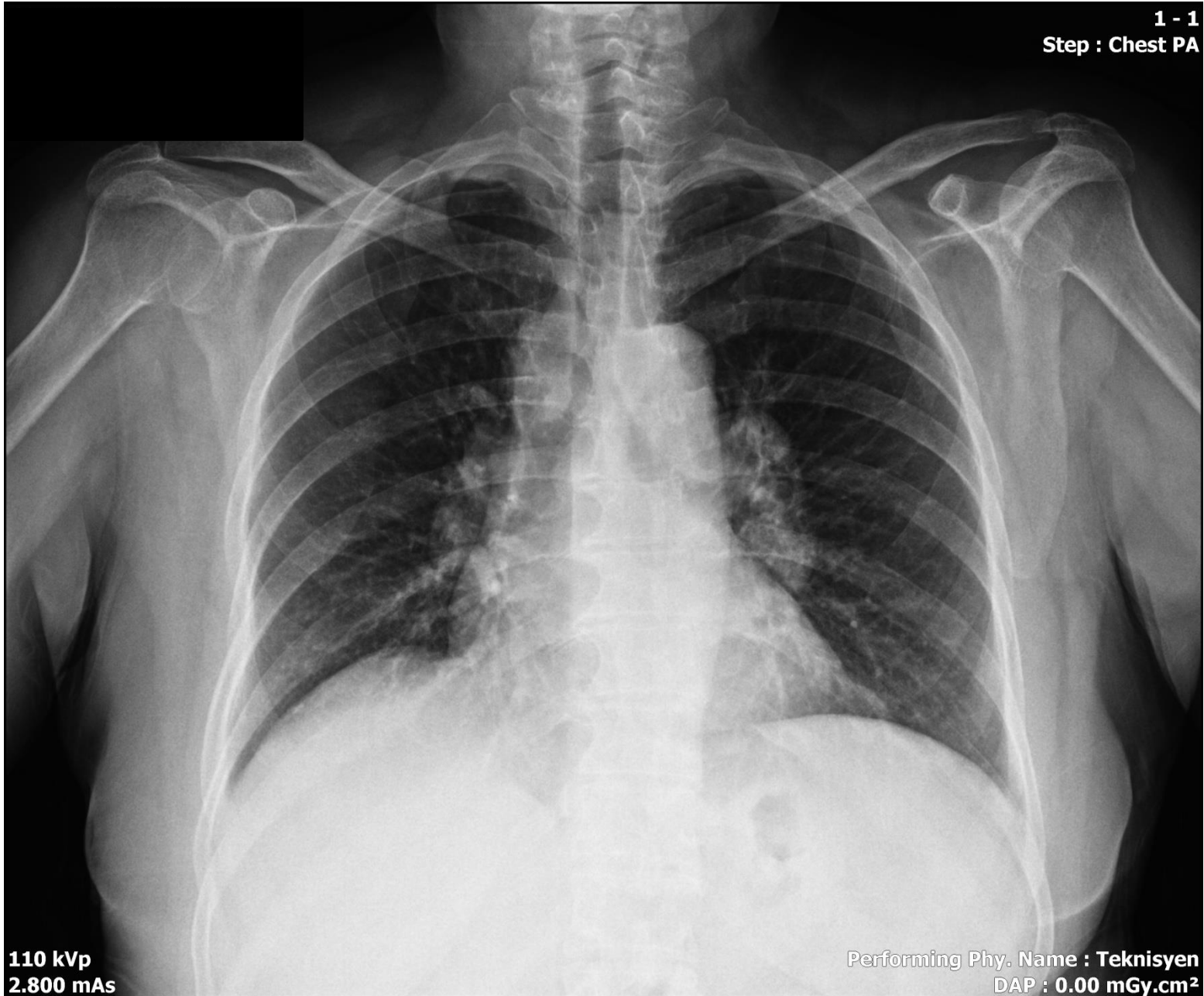
Serum ACE level

Tetkik	Sonuç	Ünite	Referans Değerler
Serum ACE düzeyi	↑ 80.0	U/L	13.3 - 63.9

Other biochemical results are within normal limits.

Glukoz (Serum)	102	mg/dl	70 - 110
Kan üre azotu (BUN)	29	mg/dl	10 - 50
Kreatinin	0.70	mg/dl	0.30 - 1.2
GFR	95.0	ml/dk/1,73 m ²	70 - 140
Protein (Serum)	75.4	g/L	60 - 85
Albümin (Serum)	48.0	g/L	32 - 52
Kalsiyum (Ca)	9.9	mg/dl	8.6 - 10.6
Sodyum (Na) (serum ve vücut sıvılarında, herbiri)	139	mmol/L	133 - 150
Potasyum	5	mmol/L	3.3 - 5.5
Klor (Cl)	103	mmol/L	95 - 115
Aspartat transaminaz (AST)	13	U/L	< 40
Alanin aminotransferaz (ALT)	15	U/L	< 40
Laktik Dehidrogenaz (LDH) (Serum)	215	U/L	< 247
CRP	4.4	mg/L	< 5 riskli: >5 Normali: 0-5

CHEST X-RAY (20.11.2023)



Thorax ve Abdomen CT

- **Thorax ve Abdomen CT with contrast (07.11.2023):**
- Subcarinal, bilateral paratracheal and hilar lymph nodes, the largest of which was 25x20mm in size, were observed.
- Liver size is normal. Liver density decreased secondary to hepatosteatorosis. Multiple cystic lesions were observed in the liver parenchyma, the largest of which was 40x38 mm in size in segment 8. The left lobe of the liver extends variationally anterior to the spleen. Intrahepatic bile ducts and vascular structures were observed in normal width and variation. The gallbladder location is normal.

PET CT (20.11.2023)

- In both lung parenchyma, several reticular nodular appearances of 3-4 mm in width with no significant FDG uptake were observed.
- In the mediastinum, multiple lymph nodes with moderate FDG uptake (SUVmax: 5.30) were observed in the right upper paratracheal, left prominent prevascular areas, both lower paratracheal, subcarinal and both hilar areas, the largest of which reached 29 mm in the subcarinal.
- Millimetre-sized nodularities were observed in both breast parenchyma and no significant FDG uptake was detected in these areas. Evaluation with USG is recommended.
- In the liver, diffusely located ametabolic cystic lesions reaching 33 mm in size at the level of segment 5-7 were found covering both lobes.
- In the abdomen, multiple lymph nodes were observed in the aortocaval, paracaval areas and peripancreatic areas around the spleen without subantimetric millimetric significant FDG uptake.
- Conclusion: LAMs with moderate FDG uptake in the mediastinum and multiple lymph nodes in the left lower cervical region in the neck and abdomen without significant FDG uptake were interpreted in favour of infectious granulomatous processes (sarcoidosis) and evaluation in the presence of histopathological findings is recommended. Her iki akciğer parankiminde birkaç adet retiküler formda 3-4 mm genişliğinde kaydadeğer FDG tutulumu saptanmayan nodüler görünüm izlenmiştir.





