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Clinical Image

Honeycomb Sternum With Pectus Excavatum: A Rare Case Report



Cemile Altınkaya*, Adem Karaman

Institution: Department of Radiology, Ataturk University School of Medicine, 25240 Erzurum, Turkey

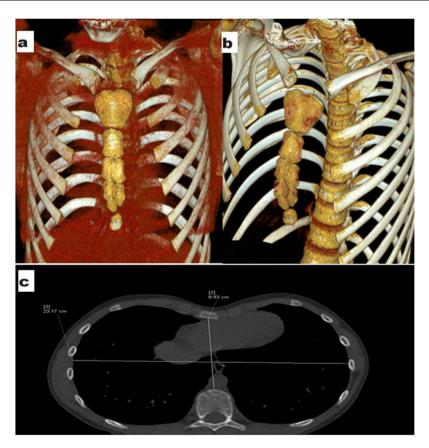


Fig. 1. Honeycomb sternum on CT imaging (a,b) and Haller Index measurement (c).

Pectus excavatum is the most common chest wall deformity in children. The central portion of the chest is displaced posteriorly relative to the rest of the anterior chest wall. Quantification of defect severity can be done by external thoracic measurements, but is most commonly quantified by the Haller Index.

The sternum usually has six ossification centers: one for the manubrium, four for the mesosternum and one for the xiphoid process, but these numbers vary slightly. The rarely reported honeycomb sternum variation is caused by the failure of the lateral ossification centers in the sternebrae to fuse, resulting in a honeycomb-like appearance of the mesosternum.^{1,2}

^c Corresponding author. E-mail address: cemilekivrakaltinkaya@gmail.com (C. Altınkaya).

A 10-year-old male patient was admitted to the thoracic surgery outpatient clinic because of a collapsed chest wall. The chest computed tomography (*CT*) scan showed an appearance compatible with pectus excavatum, which can be considered mild according to the Haller Index. A honeycomb sternum, a rare variation of the sternum, was noticed on chest *CT* imaging (Fig. 1).

The association of honeycomb sternum with pectus excavatum has not been reported in the literature. New studies on whether this rare sternal variation can cause pectus excavatum at an early age may be important in clarifying the issue.

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Conflict of Interest

All authors declare that they have no conflicts of interest.

References

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