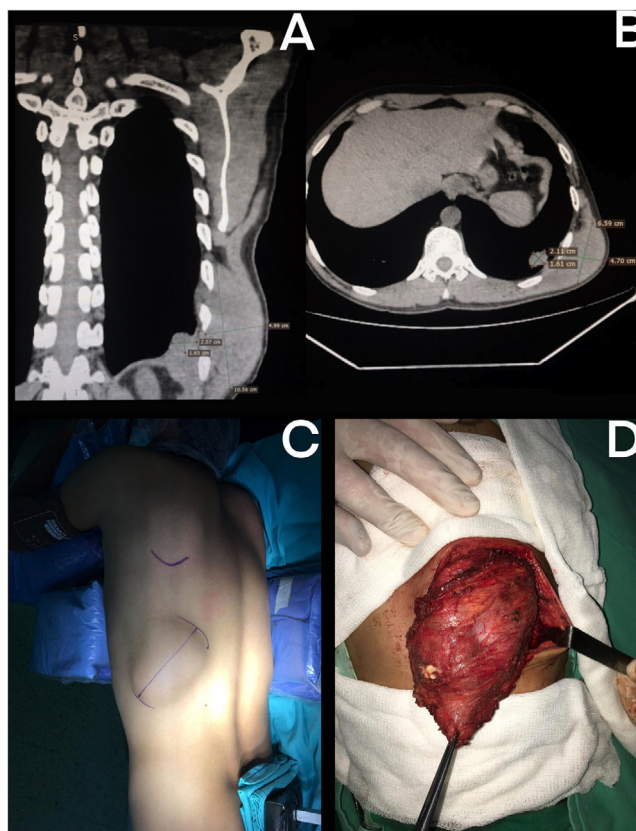


Clinical Image

**Giant Tuberculoma of the Chest Wall**

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**Fig. 1.** (A-B) pre-surgical CT scan, (C) surgical position, (D) surgical specimen.

Tuberculosis is a disease with high morbidity and mortality worldwide. Patients with tuberculosis may present symptoms that simulate neoplasms, with images remarkably similar to those caused by neoplastic nodules. We present a 31-year-old patient, native of Bolivia but residing in Argentina, who consulted for a painless tumor on the lateral chest wall that had increased in size in recent months. His CT-scan (Fig. 1A) showed a 10.5 cm × 6.6 cm mass adherent to the chest wall, dependent on it, with no clear cleavage plane, growing to the surface and with isolated pulmonary lesions. It was decided to perform a surgical excision (Fig. 1B) and the final diagnosis was giant tuberculoma, the patient discharged two days later. He completed treatment with tuberculostatics without relapse and remains free of disease 4 years

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after surgery. There are not many patients with tuberculosis diagnosed after surgery and even fewer with giant chest wall tuberculomas.<sup>1,2</sup> Definitive diagnosis generated from surgery is not frequent, since clinical suspicion and complementary examinations usually support alternative diagnoses; however, this case could reflect an incomplete diagnostic approach to this pathology, related to social factors and neglect of the prevalence of tuberculosis.

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### **Conflicts of interest**

The authors have no conflicts of interest to declare.

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