

THE PANCOAST TOBIAS SYNDROME IN THE ADOLESCENT

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INTRODUCTIO

N

☞ **First description** : **One century and half**

☞ **Embryonic origine** : ✓ Rarety

Characterizse by ✓ Classification

✓ Histogenesis

✓ Histological Dgc (*diffiult*)

✓ Prognosis (Unfavorable)

OBSERVATION

Miss M.R. : 15 years old , admitted

- ⇒ Deterioration in his healt
- ⇒ Dry cough + left thoracic pains
- ⇒ Rest dyspnoea
- ⇒ Thoracic X Ray pathological

Uneventful Medical History: (10 Kg \cong 6 months)

Family history: Father (Pneumothorax + Cutaneous Lupus)

Clinical examination: ➤ No ferish ➤ lean ➤ whining

- Thoracic distortion in breastbone
- Digital hippocratisme



CLAUDE BERNARD – HORNER Syndrome
(Ptosis, Myosis ,Enophthalmie)

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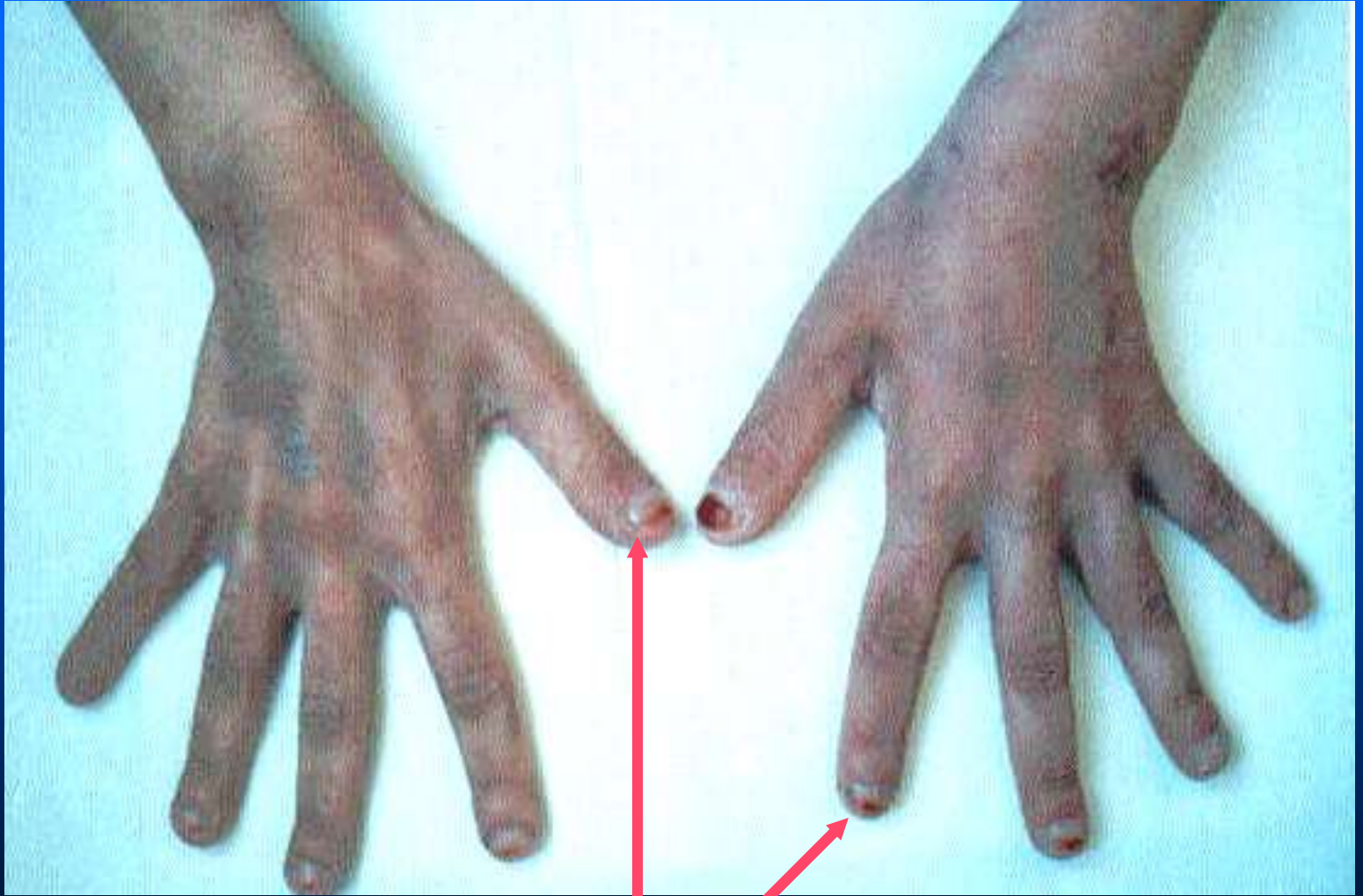
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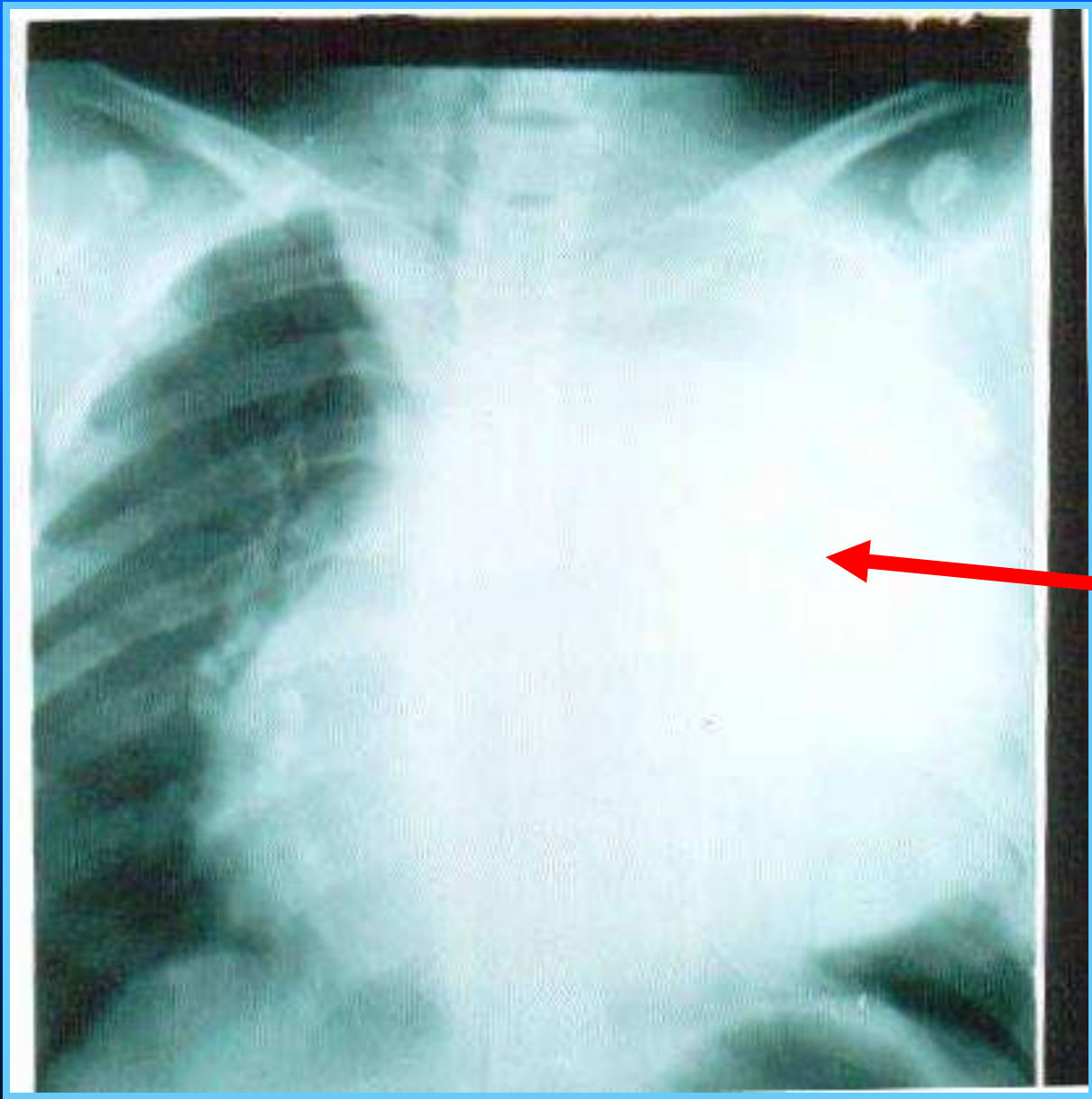
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Hippocratism digital









The differential diagnosis

▶ Carcinosarcoma :

✂ : the épithélial elements = no tumor character

✂: sarcomatous fusiform cell

✂ : central radiological seat

▶ Sarcoma :

✂: absence of all other tumor this métastase.

PANCOAST-TOBIAS

Big child = Clinical curiosity

History 1838 Hare (*Mc Donnel 1850,*
Muselier 1886, Ricaldoni 1919, Friedman 1921)

1924 Henry Pancoast

1931 J.W.Tobias

1942 Teyssier

Signs

ETIOLOGY :

Tumoral +++ ...
... Aneurysm
... Neurinome
.. T.B.cold abscess
Echinococcus VM.

2 à 5 %

PULMONARY BLASTOMA

(2)

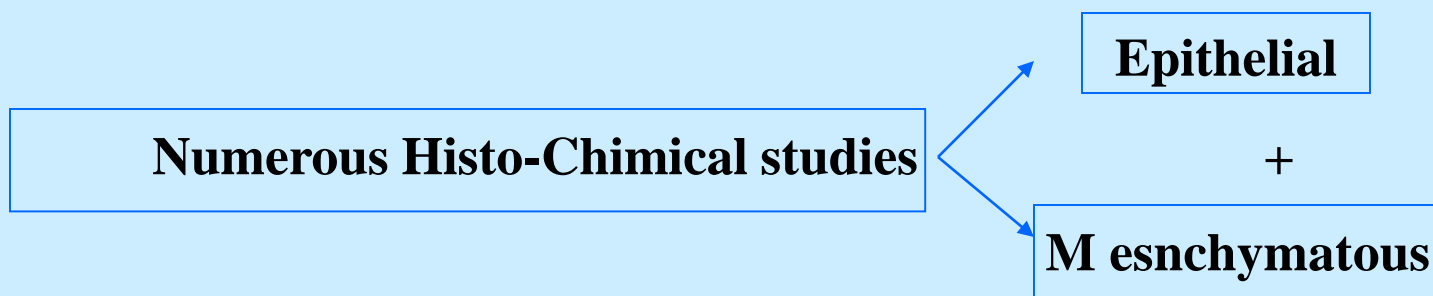
Reminder :

Bronchal tree: completely organized → 40th day of the foetal day.

Pulmonary draft forms → 22nd days from the previous intestine
(Tracheal gutter)

Windpipe gives : 2 lateral buds → **Bronchial tree by division**
dichotomic → **this one penetrates neighboring mesenchyme**

→ **pulmonary interstitium.**



PULMONARY BLASTOMA

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Numerous Histo-Chimical studies

Epithelial

+

mesnchymatous

PULMONARY BLASTOMA

(4)

DIAGNOSIS

K Unusually label in advance surgical

- * Radiological Sign
 - * Clinical Sign
 - * Tum. & Pl. Cyto-puncture
- *No specific*
- } little output

Transthoracic needle aspiration +++

Tagge Every time + C.P.: (-)

Personal case +

CONCLUSION

Pancoast tumor : Curiosity

Pulmonary Blastoma : Rare event

→ Adolescent

Diagnosis is essentially **surgical**

Can be asserted by **Needle-biopsy +++**

prognosis remains **nasty**