Introduction

Hydatid cystic disease is still endemic in North Africa, usually located in the liver and lung. Mediastinal hydatid disease remains very rare.

CASE PRESENTATION

We report here a case of a 40-year-old woman initially presented with hemoptysis and cough.

Chest X-ray showed a large opacity of the mediastinum.

CT scan showed a huge hydatid cyst of lung with multiple and multicellular mediastinal hydatid cysts arranged in a distinctive "bunch of grapes" pattern.

Performed biological tests showed no abnormality except positive hydatid serology.

Abdominal and pelvic ultrasound showed no liver or other hydatid cysts.

Spirometry showed severe airflow obstruction (FEV1 25%, FVC 90%, FEV1 /FVC 24%). Patient was sent for surgical excision of both lung and mediastinal hydatid cysts.

Discussion:

Hydatid disease is endemic in many parts of the world. Only few cases of multiple mediastinal hydatid cysts were reported in literature, it is rare to find it in the mediastinum; less than 0.1% of all hydatid disease cases.

Radiologic and serologic findings can generally help establish the diagnosis especially in patients living in endemic region.

To the best of our knowledge, a case with multiple multilocular mediastinal hydatid associated with lung hydatid cyst is not reported already.

In our case multiple mediastinal hydatid cysts were compressive with severe airflow obstruction.

Surgery incision remains the best treatment choice.

CONCLUSIONS:

Associated hydatid cysts of the mediastinum and lung are uncommon but they should be included in the differential diagnosis of the mediastinal cyst in endemic countries.

Echinococcus granulosus can produce cysts in almost every organ of the body at the same time.

References:

