

LUNG CARCINOMATOSIS: CLINICAL FEATURES AND RADIOLOGICAL SEMIOTICS

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Abstract

The term “carcinomatosis” characterizes multiple metastases to serous membranes or organ parenchyma, caused by malignant tumor in patient’s body. Even though the name of this secondary neoplasia is derived from the name of malignant tumor originated from epithelial tissue — “carcinoma”, the term “carcinomatosis” is used to define a wide range of advanced metastases of malignant neoplasm of any origin.

The main route of metastatic spread is hematogenous, less often — lymphatic, rare — aerogenous or through the diaphragm. According to autopsy data lung metastases are frequently found in chorionepithelioma, osteogenic sarcoma, kidney, testis, breast, and prostate cancer.

In early hematogenous dissemination phase clinical signs are usually mild due to preliminary subpleural localization of metastases in lung. Only when visceral pleura, chest wall or bronchi are penetrated such symptoms as cough, chest pain, hemoptysis, dyspnea, and fever appear.

Lymphangitic carcinomatosis is a secondary malignancy due to dissemination of tumor cells via the lymph vessels. In most cases the lymphangitic carcinomatosis is a result of primary hematogenous spread of metastases, appearing on radiograms or computed tomography scans as densities — nodules, masses or consolidation. In about 6–8 % of cases lymphangitic carcinomatosis are characterized by dissemination of tumor exclusively into lung interstitium without a distortion of lung parenchyma. This may cause a lot of difficulties for differential diagnosis.

Despite the high diagnostic efficacy of bronchoscopy, video thoracoscopy and lung histology, the leading tool at initial stage of diagnostics is a high resolution computed tomography (CT).

The article presents several clinical cases of lymphangitic carcinomatosis, observed at Interstitial lung diseases department of National Institute of phthysiology and pulmonology named after F. G. Yanovsky NAMS of Ukraine.

Key words: lung carcinomatosis, clinical features, differential diagnosis, computed tomography.

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