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Title: Chloroma as a mediastinal mass with bronchial infiltration and severe stenosis of the left main bronchus

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Body: We report the case of a 46 years old women, who presented to our hospital with cough, chest pain and exertional dyspnea for 1 month. The physical examination showed inspiratory stridor located on the left hemithorax. The laboratory tests showed no pathological changes. The thorax computer tomography showed a large mediastinal mass with compression of the left main bronchus.

Bronchoscopy revealed an almost complete obstruction of the left main stem bronchus with extensive infiltration of the mucosa by tumorous tissue. The EBUS-TBNA biopsies demonstrated the suspect of a neoplasm of hematologic origin. The patient was transferred to a referral center for hemato-oncology and underwent a bone marrow biopsy. It could be diagnosed an acute myeloid leukemia. The mediastinal mass and bronchial infiltration corresponded to a chloroma (myeloid sarcoma) as a rare and severe initial manifestation of the disease. Chloroma is an extramedullary, solid tumor which occurs in association with myeloproliferative or leukemic disorders. It affects 3-8% of patients with acute myeloid leukemia and can present as the initial manifestation of hematologic malignancy. The anatomic distribution includes bone, nerve, lymph node, and skin, but may involve a variety of soft tissues. Pulmonary and mediastinal involvement is rare. Just one case has yet been reported in literature with an identical pattern of airway infiltration.