

Primary pulmonary choriocarcinoma: The unexpected tumor

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Usual Choriocarcinoma is a uterine trophoblastic cancer characterized by early hematogenous spread to the lungs. However, Primary pulmonary choriocarcinoma is extremely uncommon disease. We report a primary pulmonary choriocarcinoma (PPC), isolated lung lesion, confirmed by histologically. A 44 year-old woman complaint dry cough and small amount of hemoptysis during about 2 months. She didn't have any past history and smoking history. chest computed tomography (CT) scan showed an 4.5cm sized irregular marginated mass in the left upper lobe. Bronchoscopic examination showed a mass surrounded by blood clot in the apicoposterior segment of the left upper lobe, and biopsy was performed. At the biopsy, Tumor cells show striking cytologic atypia and numerous mitotic figures (arrows) and p40 positive (H&E, x200). Considering of patients past history (young age woman, non-smoker), we had to make different diagnosis of metastatic choriocarcinoma and Squamous cell carcinoma. These tumor cells were positive for  $\beta$ -HCG. Also, Serum B-HCG rased 4297mIU/mL. At the pelvic sono, endometrial hyperplasia and took dilation & curettage. excluding gonadal primary site of the tumor. The final diagnosis was primary pulmonary choriocarcinoma. Chemotherapy was started and consisted of EMA-co(etoposide, methotrexate, actinomycin D, cyclophosphamide, vincristine). At 3 months follow-up mass sized decreased (3.5cm -> 2.4cm). The hCG level is actually normal. PPCs could mimic squamous cell carcinoma morphologically and immunohistochemically, although PPC was an extremely rare neoplasm. Positive hCG test result in patients with hemoptysis and cough could be diagnostic for PPC and may be helpful for a early diagnosis.

