

## Case of the week – 15.04.23

### Bronchogenic cyst

**Clinical history** – A 35 year old female came with complaints of dyspnoea and pain in the thoracic region. CT showed a cystic lesion in D5-D6 region

**Gross** – Received multiple tiny flap like bits altogether measuring 3x2cm

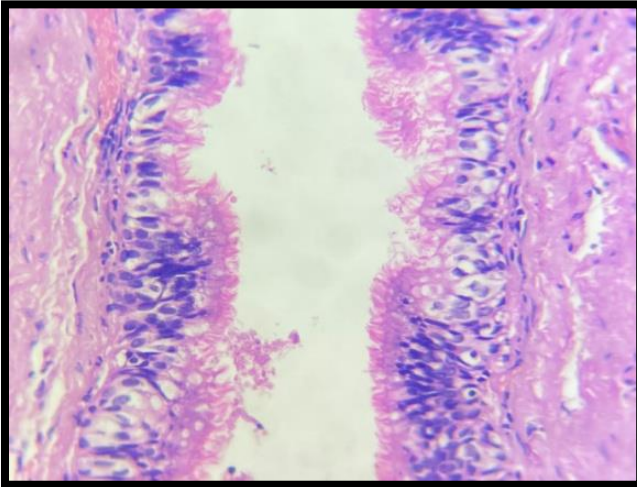


Fig 1 : showing respiratory epithelium

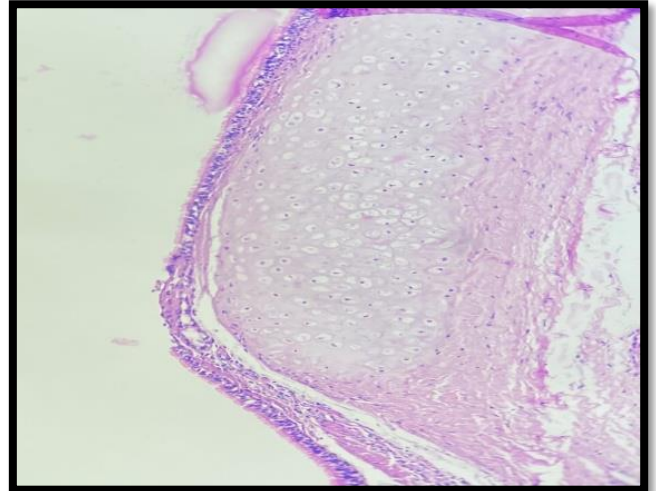


Fig 2: showing hyaline cartilage

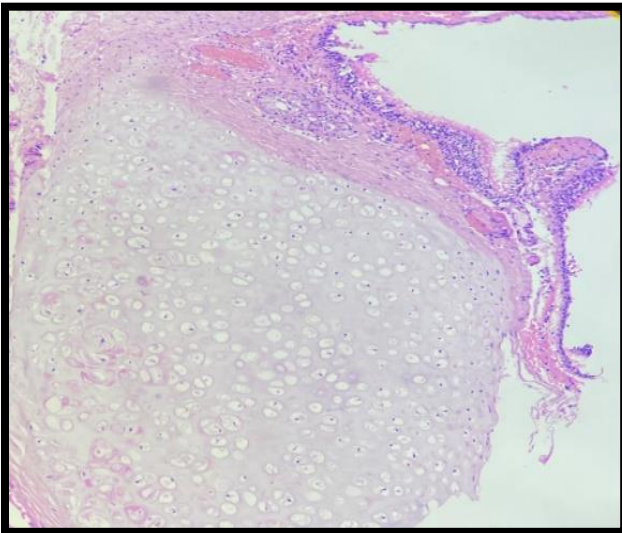


Fig 3: showing seromucinous glands

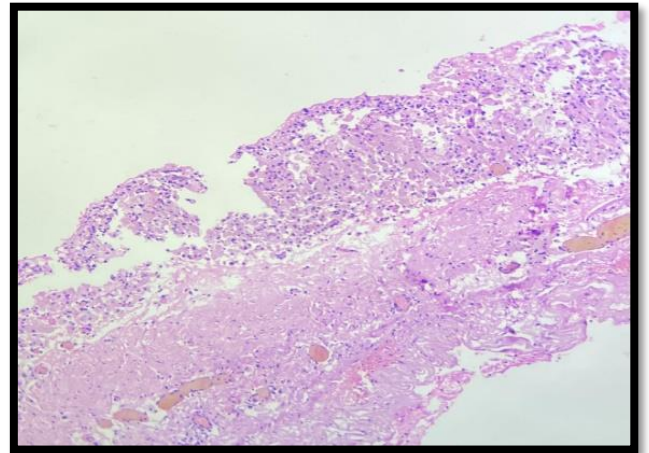


Fig 4: showing macrophages

**Microscopy** – Sections examined showed cyst wall lined by respiratory epithelium – ciliated pseudostratified columnar epithelium. Cyst wall is made up of seromucinous glands and hyaline cartilage. Collections of macrophages are also noted at some foci.

**Discussion** – Bronchogenic cyst is a benign congenital malformation of tracheobronchial tree that arises from abnormal budding of primitive foregut during gestation. The common sites are mediastinum, lung, head & neck, skin and abdomen. Incidence is 1 in 42,000. Symptoms range from pain, dyspnoea, respiratory distress and may also remain asymptomatic. It has an excellent long term prognosis with complete excision. The important differential diagnosis for this lesion are Cystic teratoma, Thyroglossal duct cyst, Esophageal duplication cyst, Branchial cleft cyst and Dermoid cyst