CLINICAL SNAPSHOT

Multiple Endobronchial Chondromas

Computed tomography image of the chest.

A 60-year-old woman who had been suffering from nonspecific interstitial pneumonia (NSIP) for many years presented complaining of progressive shortness of breath. A worsening of her NSIP was suspected, yet a computed tomogram (CT) of the chest revealed no change, and her pulmonary function tests were not significantly worse than before. No decline in blood oxygenation was seen under stress. Her echocardiogram, too, was unchanged. The already known enchondromas of the trachea and main bronchi were no larger in size. The patient's subjective dyspnea improved spontaneously over her further hospital course, and a psychogenic component was considered likely.

The enchondromas seen in the CT scan are impressive, particularly on the left. The literature contains no report of an association of these very slowly growing tumors with NSIP or with diabetes insipidus, from which the patient had also been suffering for many years (since 1976). If an enchondroma causes bronchial obstruction, the treatment is resection by surgery or by a laser technique.

Prof. Dr. med. Igor Alexander Harsch, Innere Medizin II, Thüringen Kliniken „Georgius Agricola“, Saalfeld/Saale, iharsch@thueringen-kliniken.de

Talaat Ghopreal, Innere Medizin I, Thüringen Kliniken „Georgius Agricola“, Saalfeld/Saale

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