

[PICTURES IN CLINICAL MEDICINE]

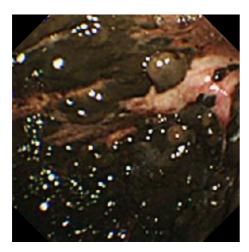
Thoracoscopic Images of Primary Pleural Melanoma

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Picture 1.



Picture 2.

A 73-year-old woman with a 1-month history of dyspnea on exertion and a history of hypertension and hyperlipidemia was referred for the evaluation of a left pleural effusion of unknown etiology. She had no history of malignancy. Diagnostic thoracoscopy under local anesthesia using a semirigid scope (LTF-240; Olympus, Tokyo, Japan) revealed numerous black tumors of varying size throughout the parietal and visceral pleura and the diaphragm surface (Picture 1) and a large black-pigmented pleural tumor (Picture 2). After a biopsy, a histopathological analysis of the mass and nodules revealed malignant cells with melanin-filled cytoplasm, indicating malignant melanoma. She was then referred to a dermatologist for systemic chemotherapy. Despite a thor-

ough evaluation, no primary lesions were detected. Therefore, the most likely diagnosis was primary pleural melanoma. Intrathoracic metastasis from melanoma is common, whereas primary pleural melanoma is extremely rare. Our patient had a pleural tumor diagnosed via thoracoscopy under local anesthesia showing massive black tumors spreading throughout the pleura.

The authors state that they have no Conflict of Interest (COI).

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