

[PICTURES IN CLINICAL MEDICINE]

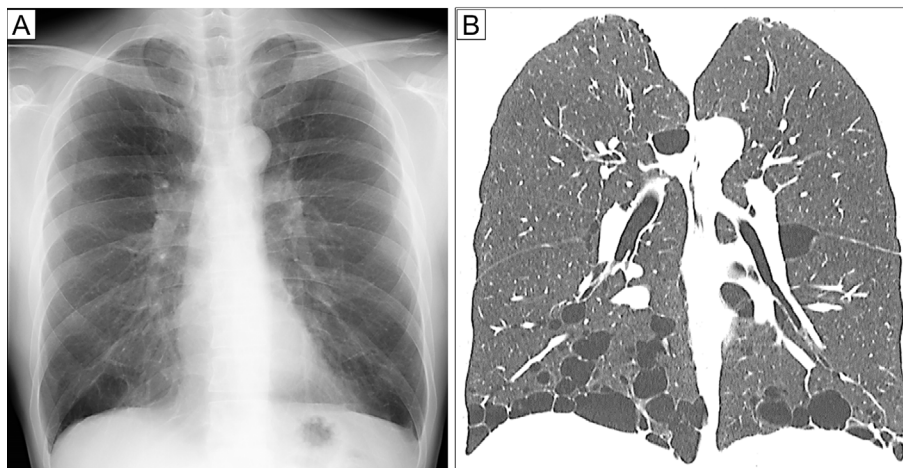
Basal Lung Cysts in Birt-Hogg-Dubé Syndrome

Yoshiaki Kinoshita, Takuto Miyamura, Hisako Kushima and Hiroshi Ishii

Key words: lung cysts, Birt-Hogg-Dubé syndrome, pneumothorax, folliculin gene

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Picture.

A 45-year-old non-smoking man with a history of pneumothorax presented with repeated chest pain. Two of his family members also had a history of pneumothorax. Chest radiography showed decreased attenuation in the bilateral lower lobes (Picture A). Coronal computed tomography revealed multiple cysts in the bilateral lung bases (Picture B). He was diagnosed with Birt-Hogg-Dubé syndrome (BHDS) by an *FLCN* mutation analysis. BHDS is a rare autosomal dominant inherited disease associated with recurrent pneumothorax, cutaneous fibrofolliculomas, and renal tumors (1, 2). Familial pneumothorax is rare, and the differential diagnosis includes BHDS, Marfan syndrome, and Ehlers-Danlos syndrome (2). The key imaging finding for suspecting BHDS is the distribution of cysts. Cysts in patients with BHDS are predisposed to occur at the lung bases or around periacinar lesions, differing from the typical api-

cal location of common causes of spontaneous pneumothorax, such as bullae/blebs or smoking-related emphysema (2).

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

References

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2. Dal Sasso AA, Belém LC, Zanetti G, et al. Birt-Hogg-Dubé syndrome. State-of-the-art review with emphasis on pulmonary involvement. *Respir Med* **109**: 289-296, 2015.

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Department of Respiratory Medicine, Fukuoka University Chikushi Hospital, Japan

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Correspondence to Dr. Hiroshi Ishii, hishii@fukuoka-u.ac.jp

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