

Medical Image

## An Unusually Large Retro-sternal Extension of Goiter

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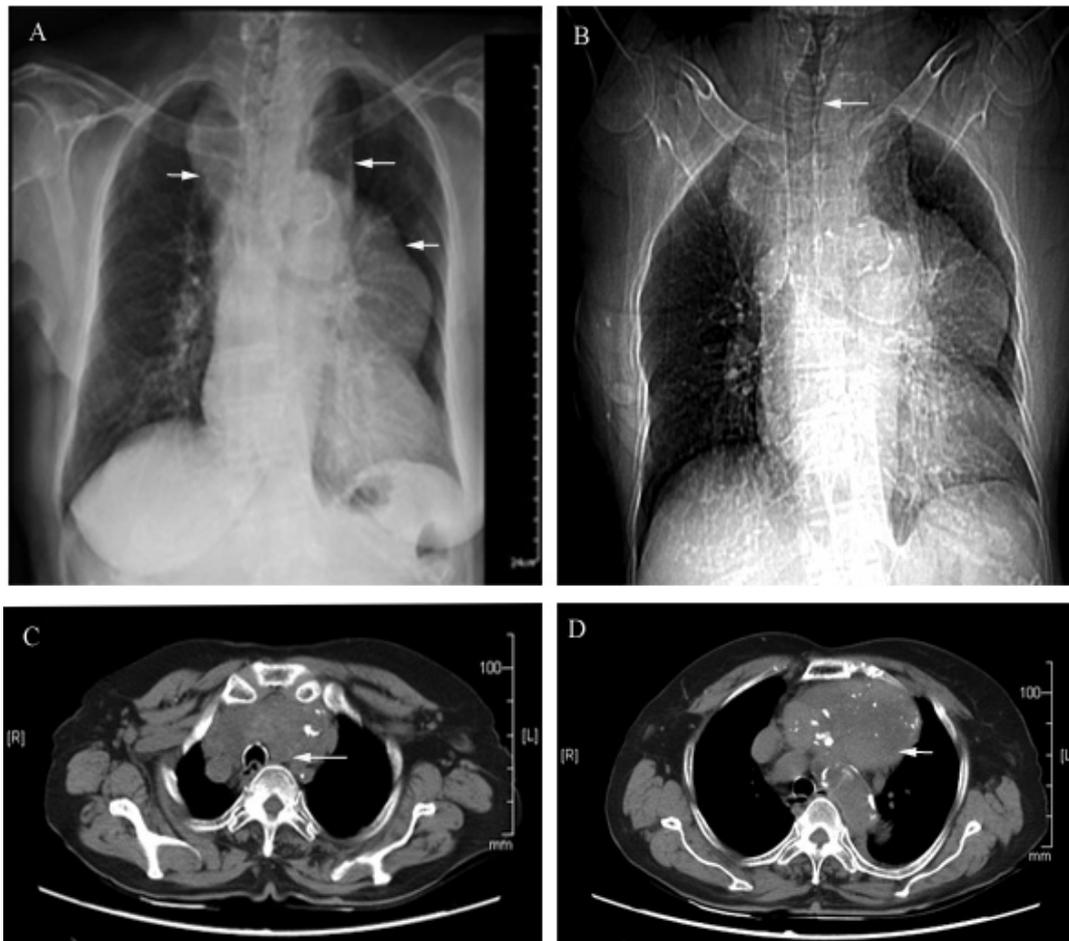


Figure 1: A) Superior mediastinal radio opacity, B) Tracheal deviation, C and D) Large retrosternal extension of the goiter.

### Case Presentation

An 82 year old female presented with an irritative cough of 5 years duration for which she was on a metered dose steroid inhaler without resolution of symptoms. Her cough was worse on lying supine. She was evaluated for a goiter and found to be hypothyroid and was on optimum thyroxine replacement for the last 20 years. She had never undergone any form of neck or chest imaging in the past. Chest radiograph showed a superior mediastinal radio opacity (Panel A, arrows) which extended to the anterior mediastinum below the level of the carina. Computerised tomography of the chest confirmed the unusually large retrosternal extension of the goiter (Panel C and D arrow) upto the level of xiphoid process with tracheal deviation to the right (Panel B, arrow). Conservative approach was decided considering her friability, absence of significant airway narrowing and anticipated high perioperative morbidity. The possibility of a retrosternal goiter should be considered when evaluating patients with breathing difficulties in goitre-endemic areas.

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