Cutaneous Metastasis of Chondrosarcoma: Case Report and Literature Review

Elham Nazar, Alireza Ghanadan

ABSTRACT

The metastasis secondary to chondrosarcoma and to respiratory system is a common finding; however, metastasis to other organs such as skin or bones is much less common. In the current report, we described a female case with the history of chondrosarcoma of the mandible who recently referred to our clinic with scalp and skin metastatic lesions. Its secondary metastasis occurred only four months after initial tumor diagnosis. Among all baseline laboratory parameters, only inflammatory biomarkers raised as the nonspecific diagnostic indices. The accurate diagnosis of metastasis to bone following chondrosarcoma may be delayed and even masked with early inflammatory reactions. Overall, in all patients suffering from chondrosarcoma, early metastasis to skin or bones should be considered especially if it raises inflammatory indices.
Case Report

Fasciola Hepatica in Explanted Cirrhotic Liver of a Patient with Chronic Hepatitis B Virus Infection: An Accidental Finding

Elham Nazar, Farid Azmoudeh-Ardalan, Iraj Mobedi, Seyed Habiballah Dashti, Faeze Salahshour, Zahra Ahmadinejad

ABSTRACT

Introduction: Fasciola hepatica infection is usually asymptomatic and may be neglected. However, severe conditions may be symptomatic due to stimulatory effects of the liver fluke.

Case Presentation: The present report describes a rare case of fascioliasis accidentally found in the explanted liver of a patient with cirrhosis due to chronic Hepatitis B Virus (HBV) infection.

Conclusions: Liver fluke infection may occur in cirrhotic livers. Thus, examination of liver explants for possible parasitic infestations such as Fasciola hepatica is suggested, particularly in endemic areas.
Schwannoma In an Uncommon Site (Upper Lip): A Case Report

Elham Nazar

**ABSTRACT**

**Introduction:** Schwannoma is one of the most common benign intracranial tumors originated from the Schwann cells of neural sheaths in the upper part of the vestibular branch of 8th nerve especially in neurofibromatosis type two patients. Schwannoma of the other parts in head and neck region is, however, relatively uncommon.

**Case Presentation:** The present report describes a rare case of Schwannoma accidentally discovered in the upper lip in asymptomatic patient lasting for more than 10 years with size enlargement.

**Conclusions:** It is now believed that Schwannoma can be seen in variety of anatomic sites. Thus, this diagnosis should be considered in differential diagnosis of soft tissue tumor in any site.
A 3-Month-Old Girl with Cleft (Bifid) Sternum and Hemangioma of the Face

ABSTRACT

Cleft or bifid sternum is a rare congenital malformation of the chest cavity. The failure of embryologic fusion of the midline mesenchymal cells causes the anomaly, leaving the mediastinal viscera exposed to injuries. The defect is usually divided into partial or complete forms and is often accompanied by other anomalies. The etiology and incidence of bifid sternum are not yet known. In this study, we present a case of bifid sternum with hemangioma of the face.
Vogt-Koyanagi-Harada Diseases Associated With Diabetes and Ulcerative Colitis: A Case Report

T.Deihim, Rezavan, M.Bahar, S.Zade Vakili, F. Ahmadi, -S.Rahimpour, N.Ebrahimi Daryani

ABSTRACT

Introduction: Vogt-Koyanagi-Harada (VKH) is an autoimmune disease which mostly affecting melanin containing tissues. In this study, we presented a case with VKH, diabetes and an inflammatory bowel disease (ulcerative colitis). To our best knowledge, this is the first report in Iran and the fourth report in world that presents a case of VKH disease associated with other diseases.

Case Report: A 31-year-old male was referred to our clinic complaining of bloody diarrhea as a case of VKH for four years. The patient had a history of diabetic ketoacidosis for four months and was under insulin treatment. Due to his resistance to high-dose prednisolone and immunomodulators, we administered anti-Tumor Necrosis Factor (TNF) drugs.

Discussion: The anti-TNF was tolerated well in the patient; however, the drug could not control all of the symptoms which allows us to taper the steroid, although it is associated with alopecia exacerbations. Due to the presence of more than one autoimmune disease in the patient, Immune Dysregulation-Polyendocrinopathy-Enteropathy-X-Linked (IPEX) syndrome and autoimmune polyglandular type 1 disease were suggested; however, by genetic assessment we could not find any association. Due to our knowledge, this is the first report of VKH case associated with diabetes and ulcerative colitis.
Unusual Presentation of Wells Syndrome: A Case Report

Safoura Shakoei, Maryam Ranjbar, Masoumeh Rohaninasab, Azita Nikoo

ABSTRACT

Wells syndrome is an uncommon disease that is typically characterized by edematous erythematous plaques, usually preceded by burning or itching skin. Histopathological examination shows dense dermal eosinophilic infiltrates in an edematous dermis at the acute phase of lesions. Some of the identified triggering factors include infection, arthropod bites, hematological malignancies, thimerosal-containing vaccines and drugs such as penicillin, lincomycin, tetracycline, minocycline and ampicillin. In this study, we describe a case of Wells syndrome in a 75-year-old woman. The considerable characteristic of this syndrome was its large size. Although this case was resistant to our treatment, the condition was improved spontaneously after several weeks without administering any other alternative treatments. On the other hand, despite its large size, this case had no identifiable trigger.
A Patient with Leiomyoma Of the Cecum: A Case Report

Marziyeh Ghalamkari

ABSTRACT

Stromal or mesenchymal neoplasms affecting the gastrointestinal tract are relatively rare lesions. A far less common group of gastrointestinal mesenchymal tumor is leiomyoma. Surgery is the mainstay of treatment for leiomyoma. Complete endoscopic resection of this tumor can be difficult due to its submucosal origin. In this study, we report a case of 48-year-old woman with leiomyoma of the cecum which was treated by endoscopic resection.
Knotting of a Lumbar Epidural Catheter during its Removal: 
A Case Report

Masoomeh Natajmajd, Ladan Hosseini

ABSTRACT

Knotting of an epidural catheter is a rare complication during the removal of an epidural catheter. There are many factors for knotting of an epidural catheter such as the characteristics of the catheter itself, patient’s factors (anatomy, position during insertion and removal of the catheter, and the body mass index), the difficulty of the procedure and the distance of advancing the catheter in epidural space. During its removal, we experienced a knot of a lumbar epidural catheter which was inserted for analgesia of labor pain. The knot was successfully removed. In this case, the knotting, due to the advancement of the catheter for a long distance which was double knotted and looped in epidural space, was far from its distal tip. To prevent this complication, catheters should be left in the epidural space with a length of less than 6 cm.
Relapsing Polychondritis and Hematuria: A Case Report

Mojtaba Fazel, Zeinab Kavyani, Masoome Sadat Sadeghzadeh, Maassoumeh Akhlaghi

ABSTRACT

Relapsing Polychondritis (RP) is very rare inflammatory disorder characterized by episodic, progressive, and destructive courses affecting cartilages. Renal involvement also is very rare presenting sign in these patients. It has rarely been described in children. In this study, we describe a 11-year-old girl with RP and complaint of frequent episodes of hematuria and dysuria with fever and periorbital edema where auricular cartilage involvement appeared after renal involvement. Renal involvement in the site of RP is mainly important, and need close observation.
Many Segments In Neutrophils Of A Patient With Megaloblastic Anemia

Sahar Karimpour Reyhan, Mahsa Abbasszadeh, Nasim Khajavi Rad

ABSTRACT

Megaloblastic anemia is a form of macrocytic anemia that leads to nucleic acid metabolism disorder and reduced cell division. The most important causes of megaloblastic anemia are vitamin B12, folate, and copper deficiency; drugs, alcohol, thyroid, and liver diseases. In lab tests of a patient with megaloblastic anemia, the first clue is anemia with high Mean Corpuscular Volume (MCV) (above 110 to 115 fL) and neutrophils with more than five distinct lobes (hypersegmented neutrophils) in peripheral blood smear. In the presence of at least one neutrophil with 6 lobes or more, the sensitivity of this finding for the diagnosis of megaloblastic anemia is 98%. This study presents a image of a peripheral blood smear in a 56-year-old man with megaloblastic anemia due to vitamin B12 deficiency. He referred to our ward with chief complaint of weakness and lightheadedness. Lab tests showed that he had pancytopenia with high MCV. The interesting thing about the patient was the peripheral blood smear with more than 8 neutrophil segments.
Unintended Overcorrection of Hyponatremia in a Patient with Suspected to Superior Mesenteric Artery Syndrome

Mohmmad Taghi Najafi, Sahar Karimpour Reyhan, Violet Zaker Esteghamati, Mahsa Abbaszadeh, Nasim KhajaviRad

ABSTRACT

Hyponatremia (Sodium concentration < 135 mmol/L) is one of the most important and common electrolyte abnormalities with a prevalence rate of about 15–20% in emergency admissions. It will increase mortality, morbidity and length of hospital stay, and also management of these patients remains problematic. A number of conditions can impair water excretion temporarily. When the cause of water retention ends, excretion of dilute urine increases the plasma sodium concentration more than what the clinician expects. This case report describes a patient suspected to Superior Mesenteric Artery (SMA) syndrome with plasma sodium of 114 mEq/L and plasma potassium of 2.3 mEq/L at presentation that developed Osmotic Demyelination Syndrome (ODS) following overcorrection of hyponatremia.
Granulomatous Mastitis: A Case Report and Literature Review

Sepehr Sahraiyan, Mahsa Abbaszadeh, Nasim Khajavi Rad, Sahar Karimpour Reyhan

ABSTRACT

Granulomatous mastitis is a rare disease and has a variety of causes. Its treatment differs depend on underlying causes. In this study, we reported a case of granulomatous mastitis in a 25-year-old woman admitted with erythema nodosum and unrespected acute inflammatory mastitis. It was challenging for us to make a definite diagnosis between sarcoidosis and idiopathic lobular granulomatous mastitis for her. At the end, our main diagnosis was sarcoidosis, because dactylitis we found in her physical examination which responded dramatically to Nonsteroidal Anti-inflammatory Drugs (NSAIDs). We started treatment with corticosteroids and immunosuppressants and recommended her a continuous follow-up.
Recurrent Nephrolithiasis Leading to Renal Failure: A Neglected Primary Hyperparathyroidism

Fatemeh Yaghoubi, Maliheh Yarmohamadi

ABSTRACT

Introduction: Nephrolithiasis occurs in 7-40% of patients with Primary Hyperparathyroidism (PHPT). Approximately 5% of patients with nephrolithiasis will have hyperparathyroidism. This study presents a rare case of hypercalcemia secondary to PHPT which eventually led to renal failure.

Case Presentation: This case report presents a 55-year-old male with a history of multiple kidney stones for 6 years who had undergone multiple interventions by Extracorporeal Shock Wave Lithotripsy (ESWL). The result of lab tests were as follows: Blood Urea Nitrogen (BUN)= 48 mg/dL; creatinine= 2.83 mg/dL; calcium= 15.8 mg/dL; phosphorus= 4.4; and serum intact Parathyroid Hormone (iPTH)= 1046pg/mL. At T99 sestamibi scan (T99scan MiBi), results showed parathyroid adenoma in the inferior pole of the right thyroid. The patient underwent parathyroidectomy. Serum calcium level returned to normal range within 3 days after surgery.

Conclusions: More attention must be paid to patients with recurrent nephrolithiasis, and such patients must be evaluated for PHPT before progressing to chronic kidney disease.
Early Tacrolimus Administration Induced Encephalopathy In A Kidney Transplanted Patient: A Case Report

Fatemeh Yaghoubi, Maliheh Yarmohamadi

ABSTRACT

Neurotoxicity due to Calcineurin Inhibitors (CNIs) of cyclosporine or tacrolimus is common after organ transplantation and associated with significant morbidity and mortality. Early identification of drug-induced neurotoxicity in transplanted patients is important. In this study, we report a 45-year-old woman who had undergone kidney transplantation and after 24 hours, she suffered from blurred vision and severe headache that did not respond to analgesic drugs. She was administered tacrolimus, prednisone, mycophenolate and anti-thymocyte globulin. Neurologic examination revealed subjective homonymous hemianopia without focal deficit. Other lab tests and brain Magnetic Resonance Imaging (MRI) were normal. There was no any evidence of infections, metabolic and neoplastic diseases. Posterior Reversible Encephalopathy Syndrome (PRES) was diagnosed by clinical test. Tacrolimus was withdrawn two days after administration and replaced by cyclosporine. Clinical symptoms were resolved four days after discontinuation of tacrolimus.
Paraneoplastic Proteinuria In Papillary Renal Cell Carcinoma: A Case Report

Fatemeh Yaghoubi, Maliheh Yarmohammadi, Mohammad Vasei

A B S T R A C T

In this study, we reported a 55-year-old man presented with anemia and weakness, history of flank pain, hematuria and nephrotic syndrome. Spiral abdominopelvic Computerized Tomography (CT) scan showed multi-loculated cystic mass (120×100×80 mm) in lower portion of left kidney with internal enhancing solid components and coarse peripheral calcifications. Radical nephrectomy of left kidney was done and biopsy confirmed the presence of Renal Cell Carcinoma (RCC), papillary type, sarcomatoid foci, and Fuhrman grade III. We assumed that the presence of nephrotic syndrome and paraneoplastic glomerulopathy led to heavy proteinuria in this case. Paraneoplastic glomerulopathy such as immunoglobulin A nephropathy and focal segmental glomerulosclerosis as a paraneoplastic syndrome of RCC have previously been reported. The RCC can present with a wide range of signs and symptoms. Atypical presentations of papillary RCC such as proteinuria should be considered for patients presenting with nephrotic syndrome.
Strawberry Gingivitis in Granulomatosis with Polyangiitis: A Case Report

Maryam Ghiasi

ABSTRACT

In this study, we reported a 42-year-old woman referred to the dermatology clinic with a 6-week history of rapidly progressive, and painful gingival hyperplasia. She had recurrent epistaxis, and three necrotic ulcers had developed on her face in the past 4 weeks. An oral examination revealed gingival hyperplasia with a granular and hemorrhagic appearance typical of strawberry gingivitis. Laboratory test results showed an elevated titer of Antineutrophil Cytoplasmic Antibodies (c-ANCAs) with a cytoplasmic staining pattern, and the enzyme-linked immunosorbent assay for anti–proteinase 3 antibodies was positive. The serum creatinine level and urinalysis results were normal. Computed Tomography (CT) scan of the head and chest revealed normal paranasal sinuses and multiple pulmonary nodules. Granulomatosis with polyangiitis was diagnosed based on these clinical and laboratory findings. Strawberry gingivitis is a rare manifestation of granulomatosis with polyangiitis, and its clinical presentation is highly suggestive of the disease. The patient initiated treatment with prednisolone and cyclophosphamide but was lost to follow-up.
Idiopathic Eruptive Macular Pigmentation with Papillomatosis

Maryam Ghiasi

ABSTRACT

In this study, we reported a case of idiopathic eruptive macular pigmentation with papillomatosis in a young woman which is an uncommon skin disease.
Primary Adrenal Squamous Cell Carcinoma in a Patient with Single Kidney: Case Report and Literature Review

Mehdi Kardoust Parizi

ABSTRACT

Primary and metastatic tumors may involve adrenal glands. Primary malignant tumors are usually adrenocortical carcinoma. In this case report, we presented the first case of primary adrenal Squamous Cell Carcinoma (SCC). A 53-year-old-man was referred with chronic right flank pain. Abdominopelvic Computed Tomography (CT) scan confirmed left kidney agenesis and a soft tissue density mass of about 40×30 mm in the right adrenal gland. Adrenal functional test results showed normal ringing. The patient underwent surgical resection of the right adrenal mass. Pathology report revealed adrenal SCC. Immunohistochemistry test demonstrated positive staining for P63, Cytokeratin (CK), CD10, CK7, chromogranin, neuron-specific enolase, and negative staining for alpha-inhibin, neurofilament, CK20, and tyrosine hydroxylase that was compatible with SCC. The results of all other tests including upper and lower gastrointestinal endoscopy, chest CT scan and bronchoscopy performed to find primary site of SCC were normal. To our best knowledge, this is the first case of primary adrenal SCC without any evidence of metastatic nature of such adrenal involvement by SCC.
An Unusual Natural History of A Rare Bladder Tumor (Primitive Neuroectodermal Tumor): A Case Report

Mehdikardoust Parizi

ABSTRACT

A primary urinary bladder Primitive Neuroectodermal Tumor (PNET) is a very rare bladder tumor. There are few described cases in literature until now. In this study, we presented a 70-year-old man with primary non-metastatic bladder PNET. The diagnosis was confirmed according to immunohistochemistry test result. The patient underwent bladder sparing protocol using radiotherapy and standard systemic multidrug chemotherapy (Vincristine + doxorubicin + cyclophosphamide). At the end of a 3-year follow-up, we performed radical cystoprostatectomy due to newly diagnosed high grade transitional cell carcinoma of the bladder at the site far from primary bladder PNET. We concluded that multimodality bladder sparing protocol using radiotherapy and standard systemic chemotherapy can be used for the management of primary bladder PNET with acceptable oncological outcomes.
A Boy with Recessive Dystrophic Epidermolysis Bullosa Presented by the Manifestations of Dilated Cardiomyopathy

Behzad Mohammadpour Ahranjani, Vahid Falahati, Marzieh Tavakol

**ABSTRACT**

Dystrophic Epidermolysis Bullosa (DEB) comprises a heterogeneous group of inherited mechanobullous disorders characterized by trauma-induced blistering, scarring associated with milia formation, and nail dystrophy. In this study, a 13-year-old boy was admitted to our intensive care unit with dyspnea on exertion, weakness and orthopnea. He complained of generalized abdominal pain and anorexia, but had no cough, nausea, vomiting or diarrhea. By physical examination, it was found out that he had diffuse skin lesions, pallor, distress and tachypnea. A gallop rhythm was heard on auscultation and heart failure was diagnosed. He received packed cells, antibiotics, dobutamine, dopamine, diuretics and 3/4 maintenance IV fluid. He was discharged with the diagnosis of recessive DEB and dilated cardiomyopathy. Chronic anemia can lead to dilated cardiomyopathy.
A Boy with Hypocontractile-Hypertrophic Cardiomyopathy

Ali Akbar Zeinaloo, Behzad Mohammadpour Ahranjani

Abstract

Pediatric cardiomyopathies are a heterogeneous group of disorders with an unfavorable and unexpected clinical course, accounting for approximately 50% of all cardiac transplants performed worldwide in children beyond the first year of life. They are also the most common inherited form of heart disease, and the most common cause of sudden death in healthy young adults. The combination of diminished systolic performance, ventricular dilation, and elevated mass-to-volume ratio distinguishes these hearts from those with dilated cardiomyopathy (normal or reduced mass-to-volume ratio) and from those with hypertrophic cardiomyopathy (normal or diminished cavity volume and normal systolic function). These hearts are often ambiguously categorized as dilated or hypertrophic cardiomyopathy, but in fact form a distinct subgroup. In this study, a 15-year-old boy whose cardiac disease had been diagnosed in infancy following work-up for recurrent UTI, was first evaluated echocardiographically at the age of 5 years and diagnosed as having dilated cardiomyopathy. During the 2-year follow-up, the disease changed from an absolutely dilated cardiomyopathy into a mixed type form showing the characteristics of a new category “hypocontractile-hypertrophic cardiomyopathy”. The patient was then begun to receive medications and was classified as New York Heart Association (NYHA) class 2. Hypocontractile-hypertrophic cardiomyopathy is a new category that requires further investigation of its etiology, natural history and possible treatments.
A 58-Year-Old Man With Abdominal Pain: Acute Appendicitis due to an Appendicolith

Seyed Mojtaba Aghili, Maryam Kia, Rokhsareh Aghili

ABSTRACT

In this study, we report a 58-year-old man referred to the emergency department with abdominal pain, nausea and loss of appetite for the last 8 hours. He reported diffuse pain that had been localized to the right lower quadrant.
Intestinal Obstruction Caused by Phytobezoars

Maryam Kia, Seyed M Aghili, Rokhsareh Aghili

ABSTRACT

A 55-year-old woman with a 3-month history of abdominal pain presented to the emergency department with chief complaints of worsening abdominal pain and peros intolerance for the past three days. Her medical history was noteworthy for watery diarrhea without fever, loss of appetite, weight loss, nausea, and vomiting. Examination revealed abdominal tenderness over right and Left Lower Quadrant (LLQ). Plain radiography and computed tomography showed round calcified mass with small areas of air in cecum and 2.5 and 4.5 cm-diameter round masses in LLQ.
A 27-years-old Man with Abdominal Pain: Lead Toxicity

Maryam Kia, Rokhsareh Aghili, Seyed Mojtaba Aghili

ABSTRACT

A 27-year-old man came to our emergency department with chief complaints of abdominal pain, nausea and vomiting, colicky pain in all area of abdomen without any radiation and generalized myalgia. He had no any previous medical problem and had worked in a car battery-recycling factory.
Ventriculoperitoneal Shunt Dysfunction due To Pseudocyst Formation After Percutaneous Nephrolithotomy: A Case Report

Naser shakhse salim, Anahita Ansari Djafari, Hassan Hoshyar, Behnam Shakiba

ABSTRACT

Ventriculoperitoneal shunt insertion is the treatment of choice for the children born with congenital hydrocephalus. Pseudocyst formation is a rare complication in these patients. There are some reports of this problem due to repeated shunt surgeries or infection and inflammation. This complication may present with abdominal pain, abdominal mass, vomiting, and headache. Ventriculoperitoneal shunt dysfunction and pseudocyst formation are more common in children but has been reported in 21 years after the shunt surgery.
A Rare Case Report of Undescended Testis: Both on One Side

Davoud Tasa, Ahmad Fotoohi, Farhang Safarnejad, Anvar Elyasi

ABSTRACT

Purpose: Undescended Testis (UDT) is a medical term that uses for any testis that is not in its normal place (bottom of the scrotum). The UDT can be classified as unilateral and bilateral. Unilateral UDT is more common than bilateral UDT. There is a very rare condition in which both testicles are on the same side and have not descended.

Case Report: We reported a 3-year-old boy with a chief complaint of bilateral testicular mass absence. Diagnostic evaluation was performed but testes were absent in scrotum. Laparoscopy was carried out and rare cases of UDT was diagnosed where both testicles were on the left side of the pelvis by two separate spermatic cords. The shorter spermatic cord was fixed in the left scrotum and the longer one fixed on the right side. The testis was normal according to the follow-up examinations.

Conclusion: We had a very rare case of UDT with crossed testicular ectopia with two separate spermatic cords both fixed into the scrotum and kept alive successfully.
Fecal Microbiota Transplantation for Recurrent Clostridium Difficile Infection in Patients with Inflammatory Bowel Disease: Case Series

Naser Ebrahimi Daryani, Tina Deihim, Hanieh Paydari, Ali Niksrat, Masoud Alebouyeh, Fahimeh Sadat Gholam Mostafaei

ABSTRACT

Clostridium Difficile Infection (CDI) in patients with inflammatory bowel disease is associated with more severe disease, longer hospital admission, higher treatment costs, higher risk of colectomy and higher mortality rate. The classic endoscopic view of the disease is adherent yellowish-white multifocal membrane, called “pseudo-membrane”. The stool polymerase chain reaction test is the best way for identifying this organism. Patients with mild to moderate infection are treated with oral metronidazole, while severe infections are treated with oral vancomycin for 10 days. The first recurrence of CDI is treated with the same regimen as the initial episode; however, the second recurrence is treated with pulsed vancomycin therapy. In the third recurrence, Fecal Microbiota Transplantation (FMT) is one of the treatment choices. This study is a report of three successful FMT in our patients.
A Case of Extrapulmonary Intrathoracic Hydatidosis with Pseudochylothorax

Shahideh Amini, Zohreh Kahramfar, Besharat Rahimi

ABSTRACT

Echinococcus is a great re-emerging public health issue. Intrathoracic and extra pulmonary hydatid cysts with pseudochylothorax are rare. There is no standard treatment for hydatidosis with pseudochylothorax. Pharmacotherapy approaches may be an option in case of long duration of disease and high risk for surgery.
Multiple Endocrine Neoplasia Type 2B Syndrome Presenting with Chronic Cough: A Case Report

Mohsen Esfandbod, Hanieh Radkhah

ABSTRACT

Multiple Endocrine Neoplasia Type 2B (MEN2B) is an autosomal dominant disorder characterized by Medullary Thyroid Carcinoma (MTC) and pheochromocytoma. The MEN2B syndrome also includes mucosal neuromas, typically involving the lips and tongue. Patients with MEN2B also have Marfanoid habitus. Dominantly inherited germline mutations involving the RET (rearranged during transfection) proto-oncogene are responsible. Affected patients usually present in childhood with thyroid mass or gastrointestinal symptoms. In this study, we reported a 27-year-old man referred to us with metastatic MTC. The screening for pheochromocytoma was negative. This case exemplifies the rare presentation of MEN2B syndrome due to metastatic MTC and emphasizes the need for screening all cases of MTC for RET mutation.
Treatment of Vincristine-Induced Ileus with Metoclopramide: A Case Report

Hamidreza T Masoumi, Molouk Hadjibabaie, Morvarid Zarif-Yeganeh, Behrouz Khajeh, Ardeshir Ghavamzadeh

ABSTRACT

Introduction: Acute lymphoblastic leukemia is an invasive malignancy which should be treated with several cytotoxic medications. Vincristine-based regimen is among the most commonly used regimens for the treatment of adult acute lymphoblastic leukemia. Peripheral neuropathy caused by vincristine provides a limitation in dose administration and can influence the treatment outcome and patient's quality of life.

Case presentation: Ileus and constipation occurred as a result of autonomic neuropathy in a 58-year-old man who underwent vincristine-based regimen for acute lymphoblastic leukemia treatment. Despite the administration of several laxative agents for constipation, the complication was not improved. Hence, metoclopramide as a prokinetic agent was administered intravenously, and patient bowel movement and defecation started after 24 h.

Conclusions: There is no approved protocol for vincristine-induced autonomic neuropathy treatment; therefore, prokinetic agents such as metoclopramide can be considered as an option for ileus treatment after ruling out the possibility of bowel obstruction. Prophylactic stool softeners should be administrated in all patients undergoing chemotherapy with vincristine to prevent gastrointestinal motility disorders.
Fatal rupture of internal jugular vein pseudoaneurysm in a patient with Neurofibromatosis Type 1

Amirsina Sharifi

ABSTRACT

Fatal rupture of internal jugular vein pseudoaneurysm in a patient with Neurofibromatosis type 1 (NF-1) is an autosomal dominant disorder. Although NF-1 is known to involve nerves and connective tissue, vascular involvement may also be seen; however, pseudoaneurysm formation and rupture is an unusual complication. In this study, we reported a fatal case of internal jugular vein aneurism rupture which presented with a lateral neck mass in a 25-year-old female. Degeneration of neurofibroma which was in contact with or infiltrated the vein wall might be the underlying pathology. This case happened in E1 section of the Emergency Department of Imam Khomeini Hospital.
Pituitary Macroprolactinoma with Mildly Elevated Serum Prolactin: Hook Effect

Moloud Payab, Mahnaz Pejman Sani, Mahbube Ebrahimpur, Mohammad Reza Mohajeri-Tehrani

ABSTRACT

A 45-year-old man was admitted to our department with complain of severe headache for 6 months. He also suffered from several problems such as visual field defect, decreased energy and libido, body hair loss, cold intolerance, decreased appetite and dry skin. Physical examination showed that he was afebrile with Blood Pressure (BP)=110/70 mm/Hg; Pulse Rate (PR)= 65 beat/min; and Body Mass Index (BMI)= 24 kg/m. He had no terminal hair on face or chest, and the subcutaneous adipose tissue mass had been decreased substantially. Laboratory tests revealed: Hemoglobin (Hb)= 12 g/dL (N: 14-17 g/dL); total testosterone= 1.2 ng/mL (N:3-10 ng/mL); Luteinizing Hormone (LH)=3.3 MIU/mL (N:1-8 MIU/mL); Follicle Stimulating Hormone (FSH)=1.3 MIU/mL (N:1-7 MIU/mL); thyroxine (T4)=3.4mcg/dL (N:4-12 mcg/dL); Thyroid-Stimulating Hormone (TSH)=0.6 MIU/mL (N:0.5-5 MIU/mL); Prolactin=100 ng/mL (2-24 ng/mL); serum cortisol=6 MIU/mL (N:4-21 MIU/mL); and Insulin-like Growth Factor-1 (IGF1)=162 ng/mL(50-245). Pituitary Magnetic Resonance Imaging (MRI) results showed macroadenoma (29×16×14 mm) in the left side of sella turcica bulged to suprasellar cistern with pressure effect on left optic nerve. Visual field examination revealed mild temporal hemianopia. These finding consistent with macroadenoma and mild prolactin elevation. We observed a discrepancy between pituitary tumor size and prolactin level. The correct estimate of serum prolactin was obtained after serial dilutional measurement. Serum prolactin level after dilution was 6470 ng/mL. According to these finding, pituitary macroadenoma was diagnosed and treatment with 0.5 mg/weakly cabergoline (dopamine agonist) was started. After a 1-month follow-up, he had no symptom with improved visual field defect and his pituitary MRI results showed significant shrinkage of tumor.
Huge Ectopic Parathyroid Adenoma

Mahbube Ebrahimpur

ABSTRACT

A 67-year-old woman referred to the emergency department with nausea, vomiting, polydipsia, and polyuria. She had a history of type 2 diabetes and hypertension with chronic kidney disease and parathyroidectomy due to parathyroid adenoma nine years ago. During admission, her vital signs were stable (blood pressure= 130/80 mmHg, pulse rate= 70 beat/min, respiratory rate= 13/ min). Neck examination showed that thyroid gland was in normal size without nodules and no cervical lymphadenopathy was found. Laboratory tests revealed: anemia (hemoglobin= 11 g/dL; normal range, 13.5-17.5g/dL); hypercalcemia (calcium= 13 mg/dL; normal range, 8.4-10.2 mg/dL); elevated serum level of Intact Parathyroid Hormone (PTH) (291 Pg/mL; normal range, 10-65 pg/mL); phosphate (2.5 mg/ml; normal range, 2.2-4.4); blood urea nitrogen (40 mg/ml; normal range, 7-18 mg/dL); Thyroid-Stimulating Hormone (TSH) (3.7 µu/mL; normal range, 0.5-5 µu/mL); thyroxine (T4) (7 µg/dL; normal range, 5-12 µg/dL); and 25-hydroxy vitamin D (180 nmol/mL; normal range, 75-200 nmol/dL). Tc-99m sestamibi scan showed persistent radiotracer uptake in the right middle of the mediastinum. In Magnetic Resonance Imaging (MRI) scan revealed solid-cystic lesion in the superior posterior mediastinum, posterior to trachea about 33×24 mm. After fluid resuscitation, calcitonin and loop diuretic therapies and open thoracotomy was performed. She was asymptomatic and had normal serum calcium and PTH levels after regular follow-up.
A Case of Anesthesia Mumps after Tibial Fracture Surgery

Afshar Etemad-Aleagha, Fatemeh Hajimohamadi, Ali Ghasemi, Shahram Samadi

ABSTRACT

Acute transient swelling of the parotid glands during or after surgery under general anesthesia has been prescribed by previous studies. This complication is called anesthesia mumps. The swelling and enlargement of glands are transient and may last from a few minutes to several days. In this study, we present a case of a bilateral parotid swelling observed in immediate postoperative course in a patient admitted for tibial fracture surgery.
Glioblastoma Multiforme: A Case Report

Rana Farshbaf Aghaeinejad

ABSTRACT

Glioblastoma Multiforme (GBM) is the most common and most aggressive malignant primary brain tumor. These tumors contain various cell types which are the most common being astrocytes. Tumors are intracranial lesions with varying shapes that grow rapidly. The GBM tumors most commonly present as solitary lesions; multiple lesions are rare. The aim of the present case report was to investigate the imaging features of GBM. We reported a 34-year-old patient hospitalized due to seizures. Magnetic Resonance Imaging (MRI) results revealed multiple lesions, heterogeneous in size, with peritumoral edema and ring-shaped enhancement. The lesions grew rapidly within 7 days of hospitalization and were initially misdiagnosed as either infections or intracranial metastatic tumors by MRI examinations. The patient was subsequently prescribed drugs. After treatment, the patient recovered and regained full consciousness; however, MRI examination several days after hospitalization revealed that the multiple lesions in the left temporal and left parietal lobes had increased size; therefore, resection of the tumor in the left temporal parietal lobe was performed. Histopathological examination identified GBM (grade IV) in the left temporal and parietal lobes. The patient succumbed to the disease 7 months after surgery due to GBM recurrence. The findings of the present study indicate that GBM may progress rapidly with a doubling time of 10 days and multiple cystic alterations.
Hemorrhagic Cystitis Due to BK Virus in a Child with all on Standard Chemotherapy without Stem Cell Transplant

**ABSTRACT**

The BK Virus (BKV) is a non-enveloped double-stranded DNA virus of the polyomavirus family that primarily affects immunocompromised people. The BKV infects humans at an early age. Initial infections with BKV are mainly asymptomatic and usually remain latent in the brain, peripheral blood, kidneys, and urothelium. Following the primary infection, viruses persist indefinitely as ‘latent’ infections of the kidney and urinary system because the virus is epitheliotropic. Reactivation of the virus infections occurs in individuals with severe immunosuppression states such as kidney and stem cell transplantation and rarely in pregnancy. Hence, BKV has been implicated as a common cause of late-onset Hemorrhagic Cystitis (HC) in patients undergone stem cell transplantation. In contrary, reports of BKV-associated diseases in non-transplant pediatric patients are almost exclusively in patients with human immunodeficiency virus infection. In this study, we report the first case of acute lymphoblastic leukemia in a child who developed BKV-associated HC without receiving stem cell transplantation, while is under standard maintenance chemotherapy.
Pneumomediastinum, Pneumopericardium and Subcutaneous Emphysema Following Acute Lymphoblastic Leukemia and Chemotherapy

Mohammad Kajiyazdi, Amir Hossein Norooznezhad

ABSTRACT

Background: Pneumomediastinum and subcutaneous emphysema are commonly reported in non-malignant conditions such as certain infections, thoracic surgery and trauma. Although this phenomenon is asymptomatic in most cases, but sometimes could be symptomatic and even rarely lethal.

Case Presentation: This study reports a 9-year-old girl with Acute Lymphoblastic Leukemia (ALL) under chemotherapy who developed pneumothorax, pneumomediastinum, and pneumopericardium. It was not clear whether the condition resulted from chemotherapy or by ALL. Unfortunately, the patient was expired before any complementary evaluations and treatments.

Conclusion: Although pneumomediastinum and subcutaneous emphysema are rare in patients with ALL, but we strongly suggest clinicians to consider them in these patients presenting respiratory symptoms.
Case Report

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Metastatic Intracranial Adenoid Cystic Carcinoma with Unknown Primary: A Case Report

Hiva Saffar, Masume Molavi

ABSTRACT

Introduction: Adenoid Cystic Carcinoma (ACC) is a slow growing epithelial malignant tumor occurring in the head and neck, and comprising approximately 8-10% of all salivary gland tumors. Intracranial metastases from salivary gland tumors are rare, present years after diagnosis of the primary tumor and are treated by multimodality therapy. Intracranial ACC with an unknown primary is an extremely rare pathobiological event.

Case presentation: In this study, we report a case of a rare intracranial ACC in a 61-year-old man presenting with progressive right facial numbness and ptosis for one year. Spiral brain Computed Tomography (CT) scan showed a 10×9-mm extra axial mass in right cavernous sinus which is suggestive of meningioma. Brain Magnetic Resonance Imaging (MRI) revealed an enhancing extra axial mass lesion measuring 21×10×8 mm at right meckel’s cave and lateral to the right cavernous sinus with suspicious thickening and hyper enhancement at cisterna portion of the right trigeminal nerve in Cerebellopontine Angle (CPA). Brain MRI findings suggest trigeminal schwannoma vs meckel’s cave meningioma. Subtemporal craniotomy and tumor resection were performed, and the patient sent to the pathology lab. Histopathological examination showed brain parenchyma induced by multiple well-demarcated nests and sheets of small-sized basaloid cells with scanty cytoplasm making some tubular structures or appearing as cribriform pattern. Ductal and tubular structures were filled with myxoid material. Many mitotic figures and apoptotic cells were observed. The diagnosis was adenoid cystic carcinoma. The patient had no history of salivary gland ACC, so far.

Conclusion: Brain metastasis of ACC are quite rare and cannot be radiologically distinguished from those of other cancers. Clinically intracranial ACC can present with symptoms of raised intracranial pressure or focal neurological deficits. Surgical decompression to reduce the mass effects and provide a pathological confirmation is the primary treatment for intracranial ACC followed by radiotherapy.
Management of Pulmonary Embolism With Pericardial Effusion: A Case Report

Behshad Pazooki, Alborz Sherafati Alborz

ABSTRACT

Pulmonary embolism is a serious complication occurring in different cancers. Patients suffering from cancer may have complications like brain metastasis or pericardial effusion, which may influence therapeutic management of pulmonary embolism. In this study, we report a patient with lung adenocarcinoma resulted in pericardial effusion who was admitted with pulmonary embolism and atrial flutter, which had made his management difficult.
Pulmonary Thromboendarterectomy in a Patient with Patent Foramen Ovale: A Case Report

Behshad Pazooki, Hanieh Radkhah, Alborz Sherafati

Abstract: Paradoxical embolism and Patent Foramen Ovale (PFO) have represented an issue of great interest during the last years, because of the strong correlation with cryptogenic stroke in young patients. The coexistence of pulmonary and paradoxical embolism is even rarer. Awareness of this complication with prompt recognition and treatment could serve to preclude significant disability and death. In this study, we presented a 51-year-old man with concomitant pulmonary embolism and overload due to Pulmonary Thromboendarterectomy (PTE) and stroke, which suggests the presence of PFO. He was successfully treated with anticoagulation and the PFO closure was performed.
Small Cell Lung Cancer Presenting with Hyponatremia: A Case Report

Behshad Pazooki, Hanieh Radkhah, Alborz Sherafati

ABSTRACT

Syndrome of Inappropriate Antidiuretic Hormone Secretion (SIADH) is the most frequent cause of euvoletic hyponatremia. It can be caused by pulmonary diseases including lung cancers. In this study, we present a case of a 45-year-old man complaining from persistent nausea, vomiting and epigastric pain. Due to elevated amylase and lipase, he was admitted with diagnosis of pancreatitis. Based on lab data, he had hyponatremia. Because of a history of smoking and a high suspicion of SIADH, chest Computed Tomography (CT) was performed which revealed right upper lobe collapse. Chest CT scan demonstrated a mass in right paratracheal region. There also were multiple hypoechoic lesions in liver. Liver biopsy revealed metastatic small cell carcinoma of the lung.
Intraventricular Hemorrhage in a Term Neonate: Manifestation of Protein S Deficiency- A Case Report

Shahriar Sahriarian, Parvin Akbari, Elahe Amini, Hosein Dalili, Tahereh Esmaeilnia Shrivany, Nikoo Niknafs, Mamak Shariat, Vafa Ghorban Sabagh

**ABSTRACT**

Protein S (PS) is an antithrombotic plasma protein that plays essential roles in limiting thrombus formation in the anticoagulant system. PS deficiency is related with recurrent thrombosis. In this study, we reported a case of a term neonate with severe PS deficiency admitted Imam Khomeini Hospital in Tehran, Iran in 2015 who had seizures and Intraventricular Hemorrhage (IVH) since the age of 3 days. Nine-month follow-up did not show any developmental problems and Magnetic Resonance Imaging (MRI) scan showed no hemorrhage.
Annular Pancreas Presenting with Painless Jaundice: A Case Report and Literature Review

Foroogh Alborzi, Naser Ebrahimi Daryani, Nader Roshan, Masoud Mami, Najmeh Ale taha

ABSTRACT

Annular Pancreas (AP) is a rare congenital abnormality in which pancreatic tissue completely surround the duodenum. Presentation of AP in adulthood is very rare and obstructive jaundice is one of the uncommon manifestations of AP in adults. In this study, we reported a 47-year-old woman with icterus, mid common bile duct stricture and annular pancreas. She was diagnosed with pancreas cancer three months after surgery. Although AP presenting with jaundice is rare but is an indicative of a significant association with periampullary malignancies which requires a complete investigation of these cancers and a close follow-up.
A 21-year-old Man with Delayed Puberty

Pardis Ketabimoghaddam, Zohreh Dadvar, Babak Salehi, Najmeh Aletaha, Seyed Farshad Allameh, Akbar Hassanpour, Talayi M.A

ABSTRACT

Introduction: Delayed puberty is defined clinically by the absence or incomplete development of secondary sexual characteristics bounded by an age at which 95% of children of that sex and culture have initiated sexual maturation. This rate for boys in the United States is 14% (an increase in testicular size being the first sign) and for girls is 12% (breast development being the first sign). Delayed puberty pathophysiologically is classified according to the circulating levels of the gonadotropins of Luteinizing Hormone (LH) and Follicle-Stimulating Hormone (FSH) into two groups of high serum LH/FSH and low or normal serum LH/FSH concentrations which are related to primary hypogonadism and hypothalamic dysfunction, respectively.

Patient Presentation: A 21-year-old boy was presented with severe respiratory distress syndrome due to pneumonia and generalized edema. Laboratory results showed pancytopenia which made clinicians work up for hematologic disorders, leading to bone marrow aspiration and biopsy which was consistent with megaloblastic anemia resulting from vitamin B12 deficiency. Another manifestation of this patient was delayed puberty which had been ignored over these years. Evaluation of delayed puberty revealed a low serum LH/FSH concentration. Accompaniment of delayed puberty resulting from hypothalamic origin with edema and hypoalbuminemia made clinicians work up for a malabsorption syndrome. Therefore, upper endoscopy and colonoscopy were performed and duodenal biopsies were consistent with celiac sprue. The unusual symptom of this patient was vitamin B12 deficiency which is rare in celiac disease.

Conclusion: Neglected celiac sprue can be accompanied by vitamin B12 deficiency probably because of the involvement of more distal parts of small intestine over the time.
A Rare Complication Of Tracheostomy Tube in Intensive Care Unit

Mohammed Abdul Zahra Sasaa MSc. Anaesthesia, Ali zaidan Alomaran MSc. Anaesthesia, Mostafa Mohammadi M.D., Jonathan spoor Medical student, Anesthesia and medical student in training, Anesthesiologist, Intensivist

ABSTRACT

Commonly seen complications of tracheostomy include hemorrhage, obstruction, and pneumothorax. These primary complications usually become apparent quickly after the procedure. However, some complications manifest themselves at a later stage. Granular tissue, scar formation, tracheal stenosis, ulceration, tracheoesophageal fistula and corrosion of the small arteries are not usually seen as secondary complications in tracheostomy. In this study, we reported an unusual case of a tracheostomy tube complication in an adult male.
Methylphenidate-Induced Psychotic Symptoms in 65-Year-Old Female with Attention Deficit Hyperactivity Disorder

Elliyeh Ghadrdan, Maryam Mousavi, Padideh Ghaeli

ABSTRACT

Methylphenidate, a stimulant, is prescribed commonly for the treatment of Attention Deficit Hyperactivity Disorder (ADHD) in children and adults. Methylphenidate is generally considered a safe medication; however, some rare adverse effects such as psychotic symptoms may occur after its use or its high doses. Moreover, this medication has a potential for abuse, especially among teenagers. There are several published cases regarding methylphenidate-induced psychosis in young adults; however, psychosis due to methylphenidate has been rarely reported in older people. This case presents psychotic manifestations due to methylphenidate use in a 65-year-old female who was taking this medication for ADHD. She consumed 3 to 4 methylphenidate hydrochloride tablets per day for several months assuming that they were sleeping pills. Antipsychotic medication was initiated and methylphenidate was discontinued which resulted in improvement of her psychosis. Alternative diagnoses, including bipolar mood disorder with psychotic feature or mood disorder due to general medical condition, were ruled out because her psychotic symptoms appeared after taking several methylphenidate tablets and disappeared after discontinuation of this medication.
Midgut Volvulus is a Rare Cause Of Intestinal Obstruction In Adults: A Case Report

Negar Firoozeh, Hadi Ahmadi Amoli, Ali Jazayeri, Ehsan Rahimpour

ABSTRACT

The incidence of midgut volvulus is rare in adults, but a significant number of cases have been reported in infants and children. In this study, we reported a 34-year-old male who referred to the emergency department with persistent periumbilical abdominal pain without any other symptoms. Contrast-enhanced computed tomography clearly showed a type of midgut volvulus like whirlpool sign, corkscrew sign, and the superior mesenteric vein to the left of superior mesenteric artery. The Ladd’s procedure was administered and emergency laparotomy was performed successfully with an uneventful postoperative recovery.
The Most Huge Giant Megacolon Caused by an Unusual Cause: A Case Report

Ehsan Rahimpour

**ABSTRACT**

**Introduction:** Anorectal malformations are one of the most common abnormalities in newborns and delayed diagnosis is usually associated with many complications for patients. Anterior Displacement of the Anus (ADA) is a congenital anorectal malformation and is a common cause of constipation during infancy, although it has been commonly neglected.

**Case Presentation:** A 71-year-old woman with a history of severe constipation since her childhood was referred to the general surgery clinic because of severely dilated colon found by computed tomography scan which had been done due to a mild right flank pain. She mentioned severe constipation from her infancy that was resistant to medical management. After examination, results showed that she had an anal position index of about 0.14 which is an indicative of ADA. Laparotomy results reported that she had a very giant megacolon. We performed total colectomy and end ileostomy and then she was discharged from hospital with good clinical condition.

**Conclusion:** Missing the diagnosis of ADA until old age can lead to giant megacolon development and consequently, severe morbidities for the patient.
A Child With (Central) Auditory Processing Disorder: A Case Report

Amir Arami, Farzaneh Zamiri Abdollahi, Mamak Joulaie

ABSTRACT

Subjects with Auditory Processing Disorder (APD) may manifest a range of complaints including impaired speech perception in noise followed by directions, and discrimination of similar speech sounds. Other disorders may also have the same behavioral manifestations.