

A CASE OF PULMONARY MICROLITHIASIS

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M.H. Aged 30. Male, Farmer, Married - of Guilan.

This patient was seen on the 2nd of January, 1959, on account of cough blood stained sputum and shortness of breath which had started six months previously, shortness of breath was worse on exertion, recently he had occasionally bouts of fever.

F.H. Nothing important.

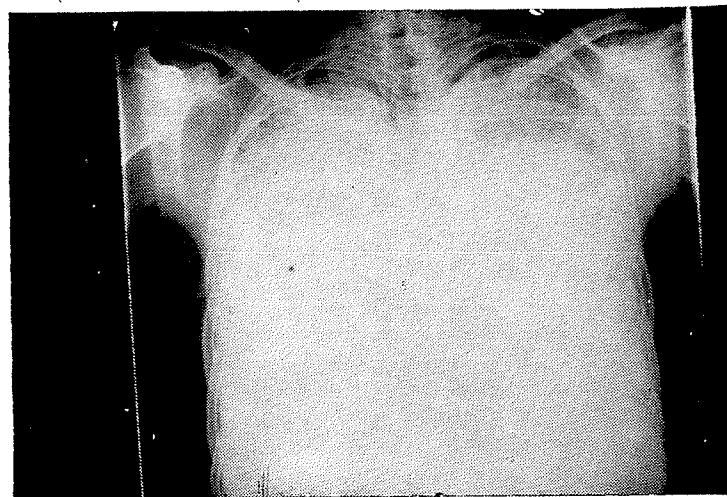


Fig 1

On Examination - a well built healthy looking man, slightly cyanosed on exertion, clubbing of the fingers was slight, heart sounds were normal. Pulse 104 per minute. B.P. 110/60. A few rales were audible over the lower parts of both lungs otherwise no other abnormality could be detected in systemic and physical examination.

Chest x-ray - lower parts of both lungs were dense and the heart shadow could not be clearly seen on the left side, the upper parts of both lungs were a bit clearer and had an appearance of wide spread mottling with fine calcified granules (Figure 1).

Blood picture: W.B.C. 9,800 5% eosinophils
 R.B.C. 50,000 000. Hb. 90%
 E.S.R. 20 m.m. 1st hour (Westergren)
 Sputum had been examined for A.F.B. several times with negative

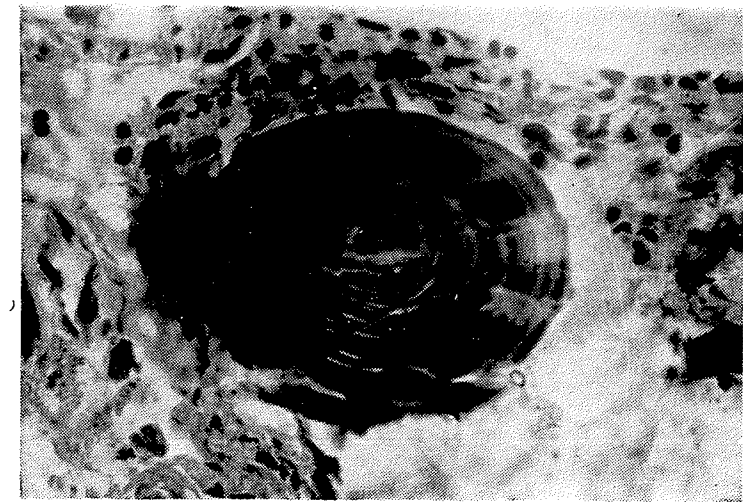


Fig 2

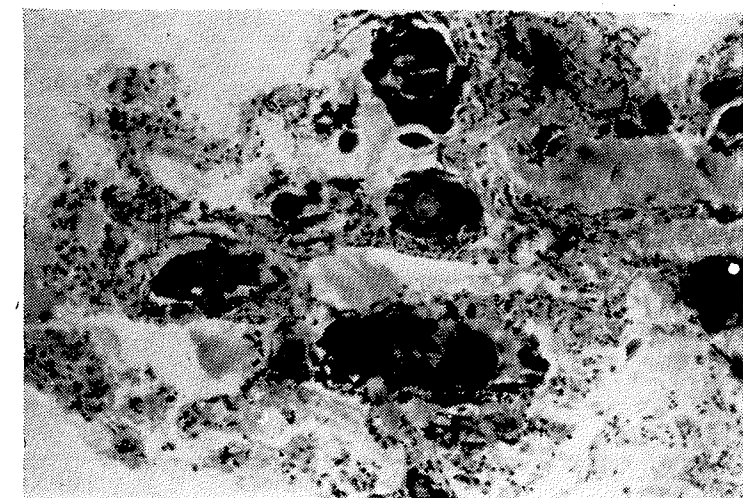
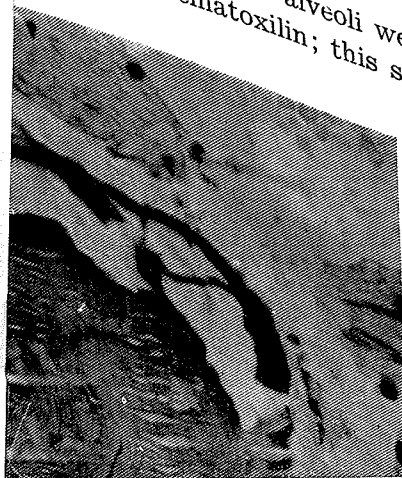


Fig 3

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Diagnosis: Pulmonary alveolar microlithiasis.

We have been using puncture biopsy of lung for the last two
months in selected cases and have had satisfactory results; we have
found it particularly useful in cases where other investigations had
failed to determine diagnosis.

Summary:

A case of pulmonary microlithiasis is described and diagnosed by
needle biopsy.

results. A needle biopsy was performed by one of us (S.S.) and histology was as follows (Figures 2, 3, 4 and 5).

Lung alveolar walls were normal but inside the alveoli were filled with a substance which deeply stains with hematoxilin; this substance



Fig 4



Fig 5

is laminated onion-skin appearance similar to corpora amylocea.

Diagnosis: Pulmonary alveolar microlithiasis.

We have been using puncture biopsy of lung for the last twelve months in selected cases and have had satisfactory results; we have found it particularly useful in cases where other investigations have failed to determine diagnosis.

Summary:

A case of pulmonary microlithiasis is described and diagnosis confirmed by needle biopsy.

Résumé

Un cas de Microlithiase (Calcosphrite) pulmonaire diagnostiqué par ponction biopsie est discuté.

References.

- 1-Merrill C. Sosman, Gerald D. Dodd, W. Duane Jones, George U. Pillmore, The American Journal of Roentgenology, Vol 77, No, 6, Jun, 1957.
- 2-The Familial Occurrence of Pulmonary Alveolar Microlithiasis.