## **Abstract**

Phantom tumors are usually found in the minor fssure, but they can also be found, although rarely, in the oblique fssure. Interlobar Pseudo-tumor also known as phantom tumor, or vanishing tumor, is a localized collection of fuid that

## **Keywords:** Phantom tumor; Chest RX; TDM

## **Case History**

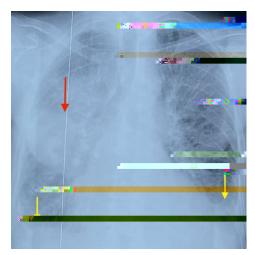
60-year-old man, chronic weaned smoker, with a history of hypertension, ischemic heart disease and mitral valve replacement, presented with recurrent dyspnea and dry cough enduring ve days.

physical examination revealed a dyspneic patient (NYHA 4) with swollen legs, auscultation reveals crackling noises, laboratory tests showed an increase in white blood cells (16000).

e chest X-ray (Figure 1) showed a well-limited homogeneous opacity of the right middle lobe (red arrow), a bilateral hilar overload, associated with images of low abundance bilateral pleurisy (yellow arrows).

In addition to these lesions the chest CT scan (Figure 2) revealed a round opacity image of water tone localized in both right sures: large (A,B) small (C), in relation to an encysted pleurisy, scattered bilateral ground-glass foci with thickening of the inter-lobular septa making the crazy-paving appearance and condensation sites with an aerated bronchogram (D).

e diagnosis of cardiac decompensation due to infectious pneumonia was made and the parenteral antibiotic + diuretic therapy was immediately initiated with reduction of uid intake. Clinical improvement has been noted and three days later, a control C-XR (Figure 3) revealed a partial regression of the observed round/oval tumor-like image.



**Figure 1:** Chest RX showed a well-limited homogeneous opacity of the right middle lobe (red arrow), a bilateral hilar overload, associated with images of low abundance bilateral pleurisy (yellow arrows).



Figure 2: Chest CT scan revealed a round opacity image of water tone localized in both right fssures: large (A,B) small (C), in relation to an encysted pleurisy, scattered bilateral ground-glass foci with thickening of the inter-lobular septa making the crazy-paving appearance and condensation sites with an aerated bronchogram (D).

\*Corresponding author: Soufane Rostoum, Military Radiology Department, Mohamed V military Hospital, University Hospital of Ibn Sina Rabat, Morocco, E-mail: rostoum.soufane@gmail.com

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 $\begin{tabular}{ll} \textbf{Figure 3:} & \textbf{Chest RX revealed a partial regression of the observed round/oval tumor-like image.} \end{tabular}$