

Rare Presentation of Pulmonary Cryptococcosis as Calcified Nodule

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The typical computed tomography (CT) findings of cryptococcal pulmonary disease were solitary or multiple nodules with or without cavitation. Single nodular shadow in 50-60% of patients, spiculation in 30%, and convergence of peripheral vessels and pleural indentation in 50% (1), but calcified nodule was never reported. **Pulmonary cryptococcosis made clinicians to detect** lung cancer and tuberculosis difficultly. Here we reported a patient suffered from pulmonary cryptococcal infection presenting rarely as a single calcified nodule.

A 46-year-old women with history of completely resected endometrial carcinoma eight years ago, a progressively enlarged calcified spiculated nodule about 7 mm in right lower lobe was noted incidentally during this year by chest CT (**Picture 1 and 2**). She was referred to our hospital and received thoroscopic wedge resection. Pathologist reported a nodule with focal necrosis and central calcification (**Picture 3**). Periodic acid-Schiff (PAS) stain indicated much of positive staining yeast-like fungi (**Picture 4**), so cryptococcus infection was diagnosed.

Reference

1. Murayama S, Sakai S, Soeda H, et al. Pulmonary cryptococcosis in immunocompetent patients HRCT characteristics. *J Clin Imaging* **28**:191-195, 2004.