A 25-year-old male patient with thalassemia major presented at the polyclinic for a routine examination. On the pulmonary radiograph, mass lesions were observed superimposed on the parenchyma of both lungs (Figure 1). In the bone structures, scattered expansile and lytic areas were determined. On the CT examination applied because of this, expansile lytic expansions were determined in all the ribs bilaterally, in the sternum, in both scapula and in the vertebrae (Figure 2). There were scattered losses of height in the vertebrae corpuses. All the bone changes were evaluated as secondary to excessive erythropoiesis. On the thoracic CT, mass lesions were observed associated with foci of extramedullary hematopoiesis in the paravertebral areas (Figure 3). After informing the patient of the condition, rather than the routine follow-up tests, blood transfusion was administered.

Skeletal changes in patients with untreated thalassemia originate from ineffective erythropoiesis and result in expansion of the bone marrow. The whole skeletal system may be affected. In addition, ineffective erythropoiesis can
develop in paravertebral areas forming the appearance of a mass in extramedullary areas (1-3).

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None.

Footnote
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References