

Posterior mediastinal ectopic parathyroid gland in a haemodialysis patient

A 66-year-old woman with end-stage renal disease, who had been on maintenance haemodialysis for 2 years, was admitted for evaluation of severe bone pain and itching. Laboratory tests showed a serum intact parathyroid hormone level of 2952 pg/ml (normally 12–88 pg/ml). A posterior mediastinal mass (22×21 mm), located at the right side of the oesophagus and posterior to the trachea, was imaged with contrast-enhanced computed tomography (Figure 1). Dual-phase ^{99m}Tc-sestamibi parathyroid scintigraphy showed increased uptake in the posterior mediastinal mass (Figure 2).

Reitz et al (2021) reported that 26% of patients with renal hyperparathyroidism had parathyroid glands in ectopic locations. The most common ectopic sites include the anterior mediastinum, thyroid and thymus (Kim et al, 2013). A posterior mediastinal ectopic

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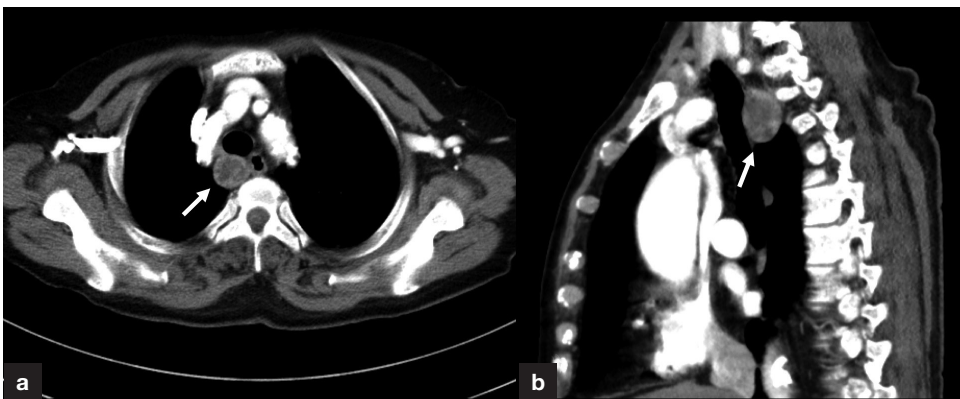


Figure 1. Contrast-enhanced computed tomography scan, (a) transverse and (b) coronal, showing an enhanced solid mass (arrows) in the posterior mediastinum.

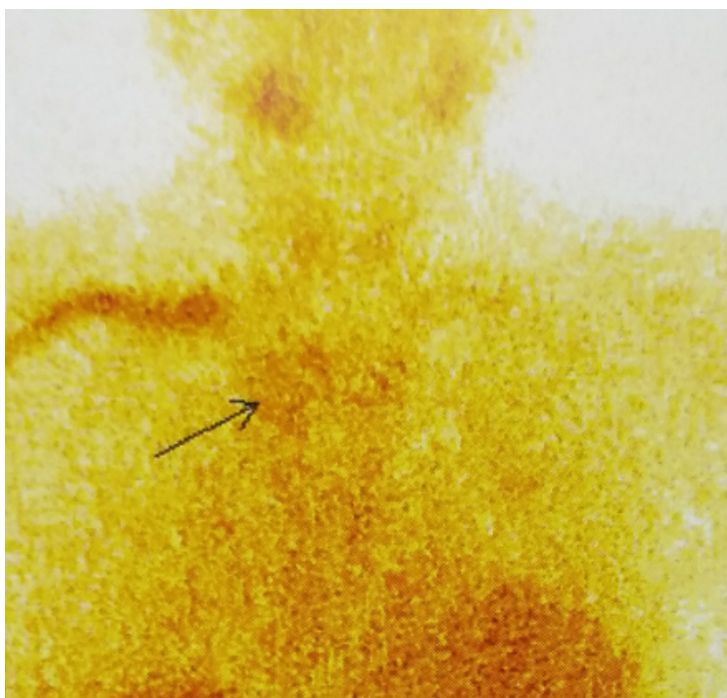


Figure 2. ^{99m}Tc-sestamibi scintigraphy revealed an ectopic parathyroid (arrow) in the mediastinum.

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parathyroid is rare. ^{99m}Tc -sestamibi scintigraphy is the most effective imaging method for locating ectopic parathyroid glands. Parathyroidectomy is the best treatment for refractory secondary hyperparathyroidism (Cunningham et al, 2011).

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