



Case Report
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Forensic Identification of Papillary Adenocarcinoma of the Lung in A Developing Community



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Abstract

Determining both the cause and the mode of death is fostered by the medico legal autopsy. A rich review from Finland exposed examples containing malignancy. Therefore, this paper exemplifies the case of lung cancer, especially because this cancer is low on the ladder of malignancy in our developing community. Moreover, the papillary variety is rare worldwide.

Keywords: Cancer; lung; Papillary; Forensic; Autopsy; Igbo

Introduction

Much importance is attached to the autopsy in its relation to forensic medicine [1]. An exposition of this theme came from Finland [2] with reference to recognizing the hidden role of malignancy. Therefore, this paper presents an autopsy that exposed a special histological type of lung cancer among the Igbo ethnic group [3]. Hitherto, the concept of lung cancer was its being a disease of Western Society rather than of a developing country like Nigeria [4].

Case Report

NO, a 43-year-old man, presented at the Medical Clinic under one of us (CN). He was having cough, bilateral chest pain, fever and breathlessness of 3 months' duration. He was found to be febrile, moderately pale and tachypnoeic. There was impaired air entry as well as dull percussion on the left side. Pleural effusion was diagnosed. Aspiration yielded 160 cc of heavily blood stained fluid. A second aspiration yielded 2,300 cc. Therefore, he was transfused one pint of blood. He did not improve but became breathless and sweated profusely. Pleural aspiration was begun but he collapsed and could not be resuscitated.

At autopsy, the left pleural space was full of blood stained fluid. The lung on that side was solid especially inferiorly. The left lower bronchus and the whole of this lobe were whitish with growths. There were metastatic nodules in lungs, parietal pleura and diaphragm. The liver showed one whitish nodule

astride a vein in the midline. There were no growths elsewhere. Microscopy revealed papillary adenocarcinoma.

Discussion

The Indian experience was that the unusual subtype of adenocarcinoma is the papillary form, 2 cases being documented [5]. Therefore, our case is equally unique. Incidentally, such a unique picture has been discussed as evidence of underlying mutations in terms of being "disproportionately seen in adenocarcinomas of lung with a dominant micro papillary growth pattern compared with conventional adenocarcinoma" [6].

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