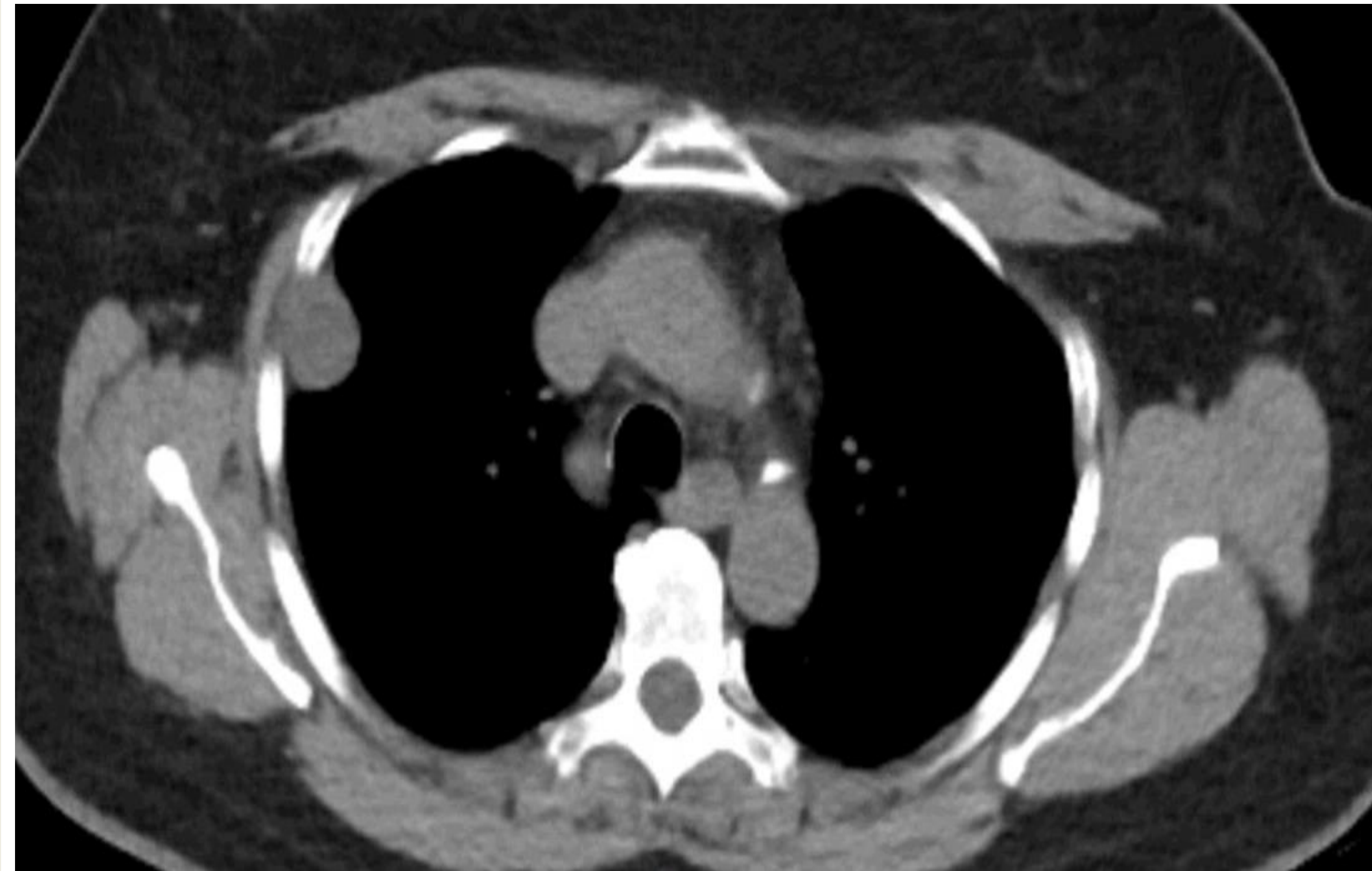


**Introduction :**

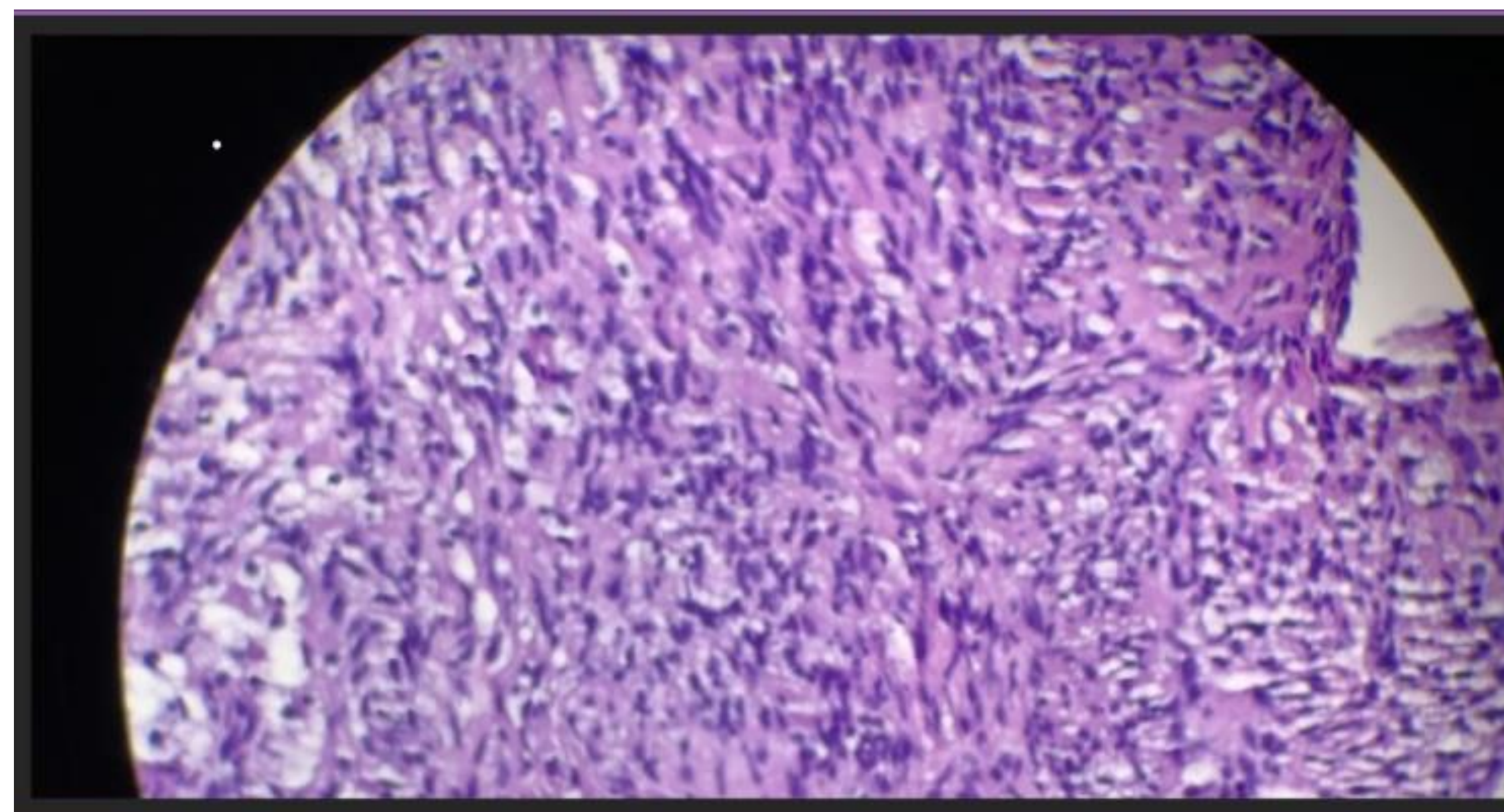
A schwannoma is a benign tumor originating from Schwann cells of the peripheral nerve sheath. They can be found in many locations, most commonly in the mediastinum. Intercostal nerve schwannoma is uncommon<sup>2</sup>. Fewer than 10% of primary neural tumors of the chest originate peripherally from intercostal nerves<sup>1</sup>. Here we present a rare case of an intercostal nerve schwannoma in the lateral chest wall.

**Case Description:**

A 56-year-old female with diabetes presented with left-sided sharp chest pain for 2 weeks without any constitutional symptoms. She had no history of malignancy. Her chest x-ray (CXR) revealed a pleural based lesion in the right hemithorax. On examination, the patient did not have any palpable mass in the chest wall. Prior CXR done in 2017 revealed an opacity in the right lateral chest wall which was felt to represent either scapula or atelectasis. CT chest on current admission (fig-1) revealed a 5.2 cm x 1.9 cm x 1.8 cm pleural based mass in the right hemithorax. A CT guided biopsy revealed spindle cell neoplasms of neural origin with immunoreactivity to S100, compatible with schwannoma. She underwent VATS with removal of the schwannoma and did well after discharge.



**Figures-1 : CT chest showing right sided pleural based mass**



**Figure-2: Biopsy showing Antoni A and Antoni B bodies**

**Discussion:**

Intercostal nerve schwannoma is an encapsulated, isolated, noninvasive neoplasm. It occurs most commonly between 20-50 year of age with no differences between sex<sup>3</sup>. Though mostly sporadic, it can be associated with neurofibromatosis type 2. Schwannoma is mostly found in head, neck, flexor surfaces of extremities, posterior mediastinum and retroperitoneum. In reviewing the modern medical literature, it is difficult to determine the frequency of intercostal nerve schwannoma in the lateral chest wall, but it appears to be rare. They are frequently asymptomatic, some patients may have pain. Surgical resection via VATS/thoracotomy is the standard treatment.

**Conclusion**

Schwannomas are slowly growing nerve sheath tumor that uncommonly involve the intercostal nerve. They should be considered in the differential diagnosis of a chest wall lesion.

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