Primary hyperparathyroidism: a giant and unusual location of parathyroid adenoma

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Aim:

- Solitary functioning parathyroid adenomas account for up to 90 percent of primary hyperparathyroidism. Parathyroid adenoma can sometimes be in unusual localization.

Case presentation

- Hypercalcemia was detected in the blood biochemistry of a 42-year-old woman who complained of nausea and vomiting. In the evaluation, a diagnosis of primary hyperparathyroidism was made.
- Labs: Calcium: 13.8 (8.8-10.6) mg/dl, Phosphorus: 2.7 (2.5-4.5) mg/dl, Parathormone 404.3 (14-72) ng/L
- Neck Ultrasound: Giant parathyroid adenoma on the left of the neck

Clinical course: 3000 ml/day saline and furosemide 40 mg/day were given for treating hypercalcemia. Localization was confirmed by parathyroid scintigraphy and the calcium level was reduced to 11.6 mg/dl with intravenous ibandronate. She was referred to surgery for parathyroid adenomectomy.

Figure 1: Giant and unusual location parathyroid adenoma
A-Neck Ultrasound
B-Parathyroid scintigraphy

Conclusion

- Ectopic parathyroid adenoma may be localized in the thymus, carotid sheath, and retro-esophageal. Detailed neck ultrasonography makes it easier to find parathyroid adenoma.

Keywords: primary hyperparathyroidism, giant parathyroid adenoma, unusual location parathyroid adenoma