40. **Shinkai M**, Rubin BK. Macrolides and airway inflammation in children. *Paediatr Respir Rev* 2005;**6**:227–35.
41. **Equi A**, Balfour-Lynn IM, Bush A, *et al*. Long term azithromycin in children with cystic fibrosis: a randomised, placebo-controlled crossover trial. *Lancet* 2002;**360**:978–84.
42. **Wolter J**, Seeney S, Bell S, *et al*. Effect of long term treatment with azithromycin on disease parameters in cystic fibrosis: a randomised trial. *Thorax* 2002;**57**:212–16.
43. **Saiman L**, Marshall BC, Mayer-Hamblett N, *et al*. Azithromycin in patients with cystic fibrosis chronically infected with *Pseudomonas aeruginosa*: a randomized controlled trial. *JAMA* 2003;**290**:1749–56.

Pulmonary puzzle

A patchy consolidation at the apical segment of the left lower lobe associated with productive cough

CLINICAL PRESENTATION

A 65-year-old female non-smoker had a 3-month history of productive cough and intermittent haemoptysis for 1 month. Plain chest radiography showed a mass-like shadow at the medial side of the left lower lung field (fig 1A). A CT scan showed a left lower lobe mass with heterogeneous content neighbouring the left pulmonary artery and descending thoracic aorta, with encasement of the superior and basal posterior segments of the bronchi (fig 1B). A CT scan with contrast medium revealed

a highly suspicious feeding artery arising from the descending aorta (fig 1C). Bronchoscopy demonstrated narrowing of the orifice of left B6 and B10 but sputum and washing/brushing cytology were all negative. The CT-guided biopsy specimen had few atypical cells, but a repeat ultrasound-guided biopsy specimen showed chronic inflammation.

QUESTION

What is your diagnosis?

See page 648

This case was submitted by:

Y-L Chang,¹ C-T Wu,¹ Y-C Lee²

¹ Department of Pathology, National Taiwan University Hospital and National Taiwan University College of Medicine, Taipei, Taiwan; ² Departments of Surgery and Traumatology, National Taiwan University Hospital and National Taiwan University College of Medicine, Taipei, Taiwan

Correspondence to: Dr Y-C Lee, National Taiwan University Hospital and National Taiwan University College of Medicine, Roosevelt Road, Taipei, Taiwan; ntuhycl@gmail.com

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Figure 1 (A) Chest radiograph showing left lower lobe consolidation. (B) CT scan revealing a left lower lobe mass neighbouring the left pulmonary artery and descending thoracic aorta with encasement of the bronchi. (C) CT scan with contrast medium showing a highly suspicious feeding artery arising from the descending aorta (arrow).