

Giant Cell Arteritis Following Thymic Carcinoid Surgery: A Case Report

Ayako YAGUCHI^{1),2)}, Kazuo INADA^{1),2)}, Shinichi MAEKAWA^{1),2)},
Akinori IWASAKI¹⁾

¹⁾ *Department of Oral and Maxillofacial Surgery, Faculty of medicine, Fukuoka University*

²⁾ *Department of General Thoracic surgery, National Hospital Organization Hospital*

Abstract

In 1 month of 2016, a 72-year-old male patient had undergone thymothymomectomy via sternal splitting incision for a tumor in the anterior mediastinum. The pathological diagnosis was atypical thymic carcinoid. Although the patient subsequently progressed well and was discharged on the 15th postoperative day, he developed a poor appetite and weight loss 3 months postoperatively, and the symptoms persisted. Therefore, he underwent detailed testing while hospitalized. A remittent fever was sustained from the 4th day after hospitalization for over 1 month. The most likely cause was considered to be postoperative wound infection. Although the source of the fever was investigated in detail, the cause was difficult to identify. At 1.5 months after starting comprehensive testing, giant cell arteritis was diagnosed based on a decreased visual acuity in the patient's left eye. Although the possibility of wound infection is typically considered when a fever of unclear origin develops postoperatively, if this is ruled out, the presence of a medical disease, such as connective tissue disease, should be considered and extensive and detailed testing should be performed.

Key words: postoperative fever of unclear origin, thymic carcinoid, giant cell arteritis, median sternotomy