DESCRIPTION
A man aged 77 years with diabetes and hypertension presented to our hospital with weight loss. The temperature was 36.7°C, the blood pressure 117/68 mm Hg and the pulse of 63/min. Physical examination was normal. CT scan image with contrast enhancement of the abdomen revealed longitudinally fused bilateral massive para-aortic lymphadenopathy (figure 1A, B) with bilateral hydronephrosis. These images appeared to mimic a hot dog (figure 2A, B). Digital rectal examination identified the enlarged prostate. Prostate-specific antigen (PSA) was 517 ng/mL (normal range, 0–3.9 ng/mL). After he was admitted, a consultant urologist performed a prostate biopsy which showed the prostate cancer (figure 1C). A CT-guided needle biopsy of the para-aortic lymphadenopathy was also conducted and it revealed the similar histological finding of prostate cancer (figure 1D). The patient underwent chemotherapy and hormone therapy and has been well at the time of the last follow-up at 3 months after the hospital discharge.

Figure 1  Longitudinally fused bilateral massive para-aortic lymphadenopathy (A) axial view; (B) coronal view) and histological findings with H&E stain ((C) prostate biopsy; (D) lymph node biopsy).

Figure 2  A hot dog ((A) axial view; (B) longitudinal view).
Learning points

▸ Prostate cancer may metastasise through lymphatics to para-aortic lymph nodes.
▸ Malignant swelling of para-aortic lymph nodes can mimic the shape of a hot dog.
▸ It is occasionally important to make a histological diagnosis of the para-aortic lymphadenopathy because of the potential curability.

Contributors ST, MN and KY cared for the patient. ST, MN, KY and YT wrote the manuscript.

Competing interests None declared.

Patient consent Obtained.

Provenance and peer review Not commissioned; externally peer reviewed.

REFERENCE