A 30-year-old man affected by a von Recklinghausen neurofibromatosis was referred for the investigation of a slow-growing, painless mass of the left chest.

A routine chest X-ray (Fig. 1) showed a ‘dysmorphism’ of the left chest wall. A Magnetic Resonance (MR) (Fig. 2) demonstrated a 15 cm in diameter axillary mass compressing the osteomuscular portion of the chest wall and adjacent lung parenchyma. Another 6 cm in diameter lesion was observed in the supra- and subclavicular region. Resection of the entire soft tissue mass was performed. Histology confirmed a completely resected, polilobular giant neurofibroma. The post-operative course was uneventful and 7 months later the patient is well and free from tumor recurrence.