A 31-year-old woman presented with sudden onset of hemoptysis. Radiologic imaging revealed a large pulmonary mass in the right lower lobe (~8 cm in diameter) and additional small bilateral nodules. The computed tomography showed small calcifications within the large lung tumour (Figure 1).

Interestingly, the tumour was also presentable in a performed 99mTc bone scan (Figure 2). Via bronchoscopy the pathology was determined as a metastasis of a giant-cell tumour. The patient had reported of a surgical excision of a giant-cell tumour in her cervical spine 10 years ago.

Giant-cell tumour of the bone is a relatively uncommon tumour that is classified as benign. On the contrary, it is known to be locally aggressive, with a high recurrence rate of almost 50%. Pulmonary metastases appear in ~3% of cases. They are usually diagnosed after 3 years, and up to 11 years after the first diagnosis. In our patient the hemoptysis spontaneously ceased, and she had been referred for lung surgery.

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