

## SUMMARY

The mediastinum is an extremely important and complex part of the thorax, that is the site of a variety of tumours. No age group or sex escapes these tumours. A wide variety are found including lymphomas, teratoid, neurogenic, thymic, thyroid tumours, and mesenchymal tumours. There are zones for common mediastinal tumours, yet it must be remembered that any particular type may be found anywhere in the mediastinum.

The classification of these tumours based on the regional distribution of these tumours is more reliable and useful, but it should be remembered that any variety may arise at any compartment or is pushed to another one.

It is generally true that both the age of the patients and the anatomic location of the mass are of considerable help in predicting the probable diagnosis.

The overall incidence of mediastinal tumours in adults is more than in children. With 25-35% of these lesions in adults being malignant, of these most are lymphomas and thymomas.

In contrast, the most common primary mediastinal neoplasms in children are malignant neurogenic tumours and lymphomas.

Neurogenic tumours originate primarily in the posterior mediastinum making up 20-40%. Of mediastinal lesions in children

lymphomas are the most common anterior mediastinal neoplasm in children; thymomas in adults.

Endocrine tumours are rare in children now, with the advanced techniques of diagnosis including MRI, CT scan, mediastinoscopy and thoracoscopy, and with the help of the routine and related investigations, it is not difficult to properly diagnose a mediastinal tumour.

Treatment of mediastinal tumours, is so variable according to the type. The extent the grading or staging and the result of the histological examination.

The lines of these modalities ranging from chemotherapy, radiotherapy, combined radio, and chemotherapy and surgical interference with wide variety of surgical modalities such as, just biopsy, debulking and radical excision.

Some of the associated complications should be taken into consideration during the management, most importantly S.V.C.S. with involvement of the S.V.C.

Now it is obviously noted that the role of combined chemotherapy and radiotherapy has been increased with different modalities.