

# Pemberton Sign in Diagnosis of Retrosternal Goiter

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## ABSTRACT

The Pemberton maneuver (elevating both arms until they touch the sides of the head for a minute) is a method to increase pressure in the thoracic inlet and further narrow the aperture.<sup>1</sup> If congestion, cyanosis of face or distension of neck veins or distress become apparent, it is suggestive of retrosternal goiter. We describe two patients with Pemberton sign.

**Keywords:** Goiter, Intrathoracic, Thyroidectomy, Thyroid surgery.

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## CASES

Two patients aged 36, 40-year-old female had neck mass for 5, 9 years respectively. Both had symptoms of compressive symptoms. On examination, there was multinodular goiter but lower margin was not palpable (Fig. 1). On Pemberton maneuver, there was dilatation of several neck veins and distress (Fig. 2). They were biochemically



Fig. 2: After arm raising significant dilatation of neck veins (Positive Pemberton's Sign)



Fig. 1: Large multinodular goiter with retrosternal extension

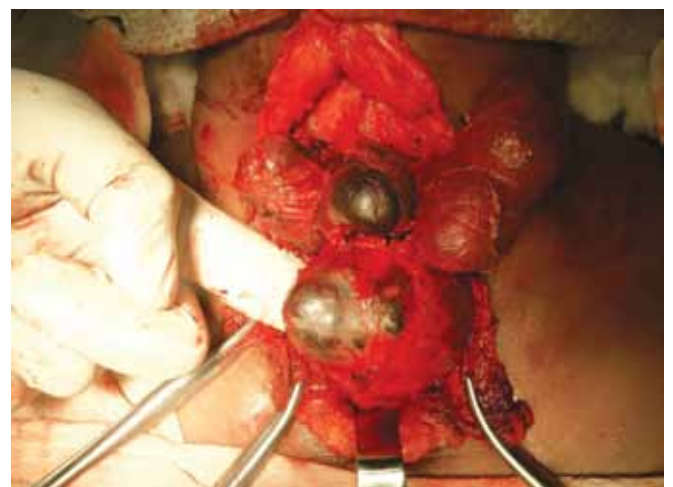


Fig. 3: Delivery of retrosternal portion by cervical route



Fig. 4: Specimen

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euthyroid and cytology was suggestive of colloid goiter. Computed tomography showed multinodular goiter with retrosternal extension. Symptoms and signs disappeared after thyroid surgery. Figure 3 is an intraoperative picture showing delivery of the retrosternal portion by cervical route. Surgeon's index finger sweeps around the intrathoracic extension of the gland and all palpable adhesions are divided gently and the retrosternal portion is delivered out in the wound. Figure 4 shows the specimen.

Dr Hugh Pemberton reported the sign as a letter to 'The Lancet' in 1946 in goiters.<sup>2</sup>

## REFERENCES

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