

Online Supplement

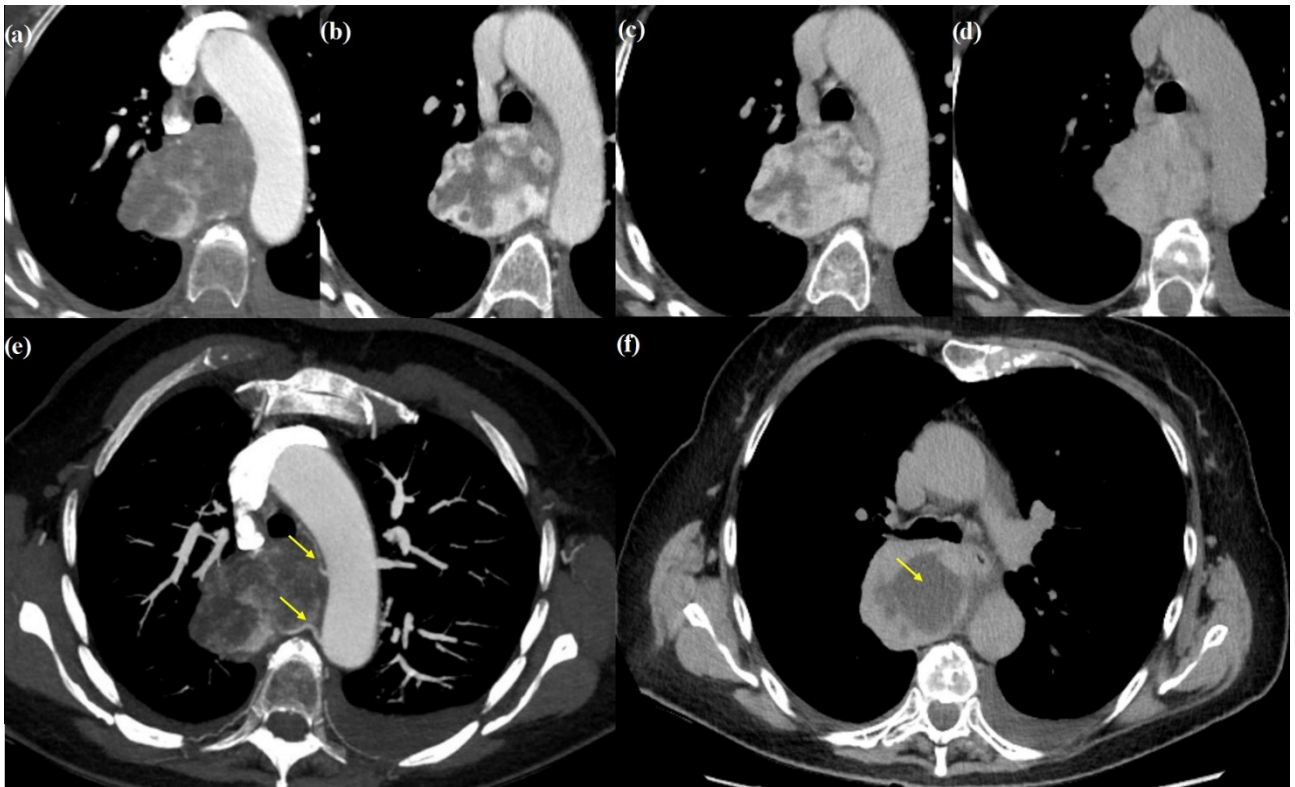


Figure S1. Enhanced CT scan study of the mediastinal mass.

(a-d) Multiphase contrast medium CT showing progressive centripetal enhancement of the mediastinal mass; (e) CT showing the two main feeding arteries (arrows) arising from the right wall of the aortic arch; (f) delayed contrast phase with the heterogeneous appearance of the mass due to a low attenuating central zone (arrow). CT: Computed Tomography.

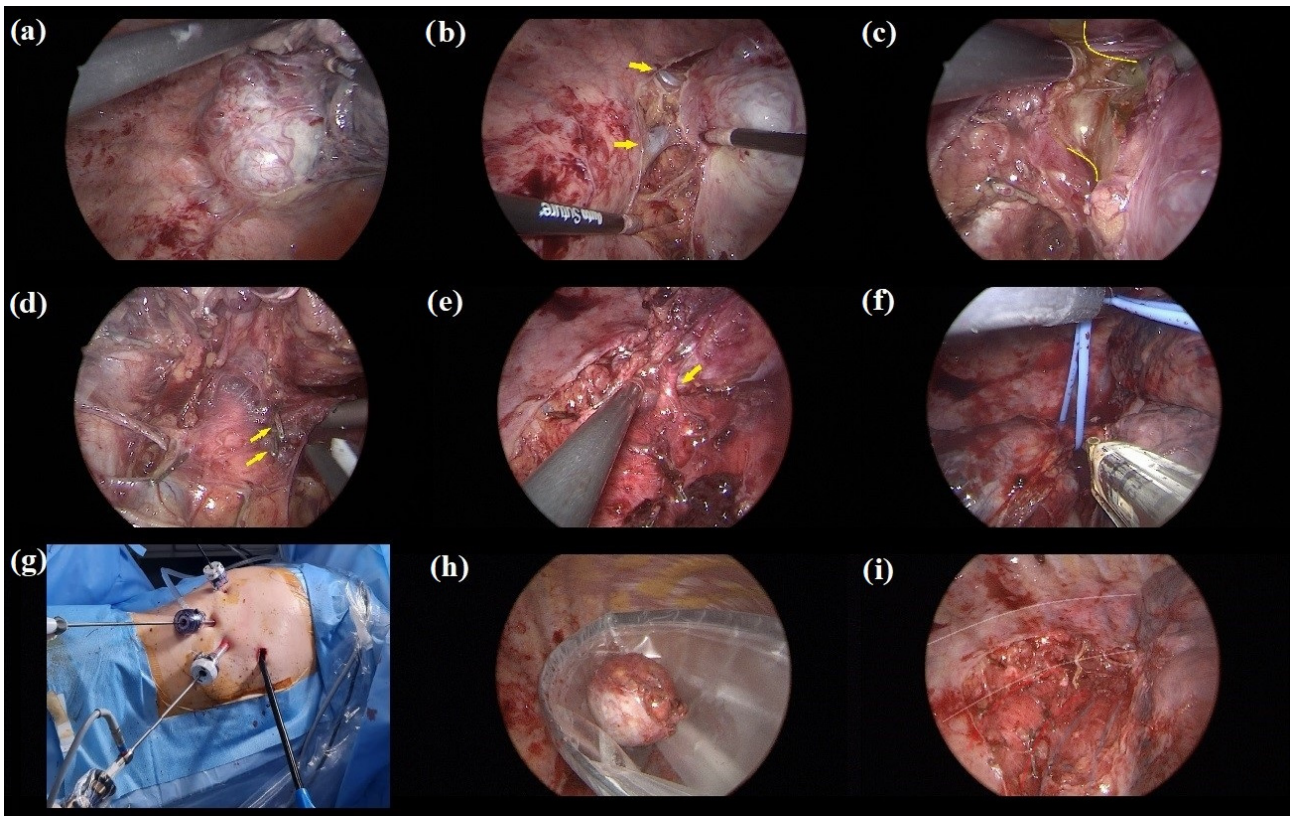


Figure S2. Video thoracoscopic surgery storyboard.

(a) Right posterior mediastinal mass with extended lung adhesions; (b) minor intercostal vein branches (arrows) are exposed; (c) identification of a sizeable intercostal vein collector of the hemangioma (yellow shape); (d-e) aortic arterial branches dissection between clip ligation (arrows); (f) leading pedicle connecting with the azygos arch being stapled; (g-h) 4-ports video-thoracoscopic positioning and hemangioma retrieval into endo-bag; (i) the resected bed of the mass exposing the vertebral bodies (white borders), the descending aorta (red borders), and the esophagus (blue borders).

Figure S3. One-year postoperative follow-up CT scan.



(a-b) Chest CT scan (transversal and frontal plan) shows no evidence of hemangioma recurrence or pleural effusion. CT: Chest Tomography.