**Editor’s Comment:**

The authors present a unique case report illustrating the occurrence of a rare giant adrenal

myelolipoma in a patient with sickle cell disease. Adrenal myelolipoma (AML) is a rare, slow-

growing, non-malignant tumor composed of adipose and hematopoietic tissue caused by

reticuloendothelial cell metaplasia. This case report and literature review detail the diagnostic,

medical, and surgical management of a 14-year-old boy with sickle cell disease who presented

with a giant adrenal myelolipoma that was symptomatic. He had a one-week history of bilateral

leg edema, and examination revealed a mass in the right lumbar region. Ultrasound revealed a

right-sided adrenal mass displacing the right kidney inferiorly. Computed tomography (CT) scan

revealed a large mass occupying the right adrenal gland. He subsequently underwent exploratory

laparotomy with excision of the adrenal mass. Immunohistochemical analysis of the mass

confirmed the diagnosis of adrenal myelolipoma. Adrenal myelolipomas are rare tumors and a

high index of suspicion is required for early diagnosis, as late presentation and diagnosis may

result in obstructive symptoms and blood vessel compression, which was the basis of this case.

The manuscript is well written and appears ready for publication, the authors were consistent and

clearly presented this rare case, which should be reported as the findings may be of interest to

others.

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