The patient is a 31-year-old male from Morocco who came to our Emergency Department due to progressive walking difficulties and a vertebral mass at the D6-D7 level. The patient was sent to the Neurosurgery Department, where a dorsolumbar MRI (Fig. 1) revealed cystic lesions in the right posterior mediastinum that invaded the spinal canal in the D6–D7 region, causing spinal cord compromise. Thoracoabdominal CT (Fig. 2) detected no other lesions. Needle aspiration of the cysts was compatible with hydatidosis. We performed right posterolateral thoracotomy, freed the hydatid cysts from the pleuropulmonary adherences and carried out en bloc resection in the chest wall and decompression of the spinal medulla, using a Gore-Tex prosthesis for reconstruction.