



A RARE CASE OF YOUNG SYNDROME

Dr. Sangita Rathod

Associate Professor, Medicine department-AMC MET medical college Maninagar, Ahmedabad.

Dr. Rushabh Somani*3rd Yr. Resident Doctor, Medicine department-AMC MET medical college Maninagar, Ahmedabad. *Corresponding Author**Dr. Setu P. Patel**2nd Yr. Resident Doctor, Medicine department-AMC MET medical college Maninagar, Ahmedabad.**KEYWORDS :****INTRODUCTION**

Young syndrome is rare inherited condition named after urologist Dr. Donald Young who first observed this condition. It is also named sinus infertility syndrome. It is seen commonly in middle aged male but also affects female. Individual born with this disease have normal functioning organs like lung and testes But tend to produce thick viscous mucous in lungs can cause repeated lower respiratory tract infections and bronchiectasis and recurrent sinusitis. Patient with this syndrome have normal spermatogenesis but functional obstruction of sperm transportation down the epididymis results into infertility.

CLINICAL FEATURES

- Pulmonary: Newborns may suffer from respiratory distress but they may have recurrent sinusitis and lower respiratory tract infections and gradually bronchiectasis.
- Rhino-sinusitis: Nasal polyps and chronic sinusitis, which may also present with chronic cough
- Chronic otitis media with recurrent acute otitis media is present in childhood and adolescence.
- Fertility: Men often have living but functional immotile spermatozoa, which results in infertility.

EVALUATION

Evaluation again is based on the presenting complaint and a high index of suspicion. The chest X-ray may show hyperinflated lungs with peribronchial thickening and bronchiectasis in the lower bases. However, a CT scan is more sensitive than a chest X-ray to assess the lung and may reveal alveolar damage and cystic bronchiectasis, which are more significant in the lower lung fields. Plain X-rays of maxillary and frontal sinuses may show central opacification.

Pulmonary function tests will reveal mild airflow obstruction in the smaller airways. In a patient with compatible clinical features, confirmation of the diagnosis is possible with genetic testing that shows homozygosity or compound heterozygosity. Young syndrome requires differentiation from cystic fibrosis (CF), which can present with similar features. While Young syndrome more often presents in males, CF presents equally in either sex. In Young syndrome, chronic sinusitis is the predominant pulmonary abnormality, while in CF, there is progressive bronchiectasis due to recurrent lung infections and colonization, especially with *Pseudomonas*. Spermatogenesis is affected in CF patients with abnormal sperm histology.

Case Presentation

21 years old male history of recurrent sinusitis, recurrent lower respiratory tract infection since childhood presented with cough with expectoration, breathlessness and fever since 5 days, Patient was unable to conceive after 2 years of marriage Patient was normally built and normally nourished.

On examination of vitals. Temperature- high(100 F),PR-100/min,BP-110/70mmhg ,RR-16/min,On respiratory examination - bilateral middle zone lower zone crepitations were present.No other systemic abnormalities.

On Investigation- Hb-13 mg/dl,WBC-8650,APC-1,48,000, CRP-57,ESR-52,S. Sodium-135,S. Potassium-3.70,S.IgE-16

Sputum CS- heavy growth of pseudomonas

CXR PA and HRCT suggestive of cystic bronchiectasis, X ray PNS suggestive of changes of chronic sinusitis.

On Semen Analysis-

Total sperm count were in normal range 3.2(million/cumm)

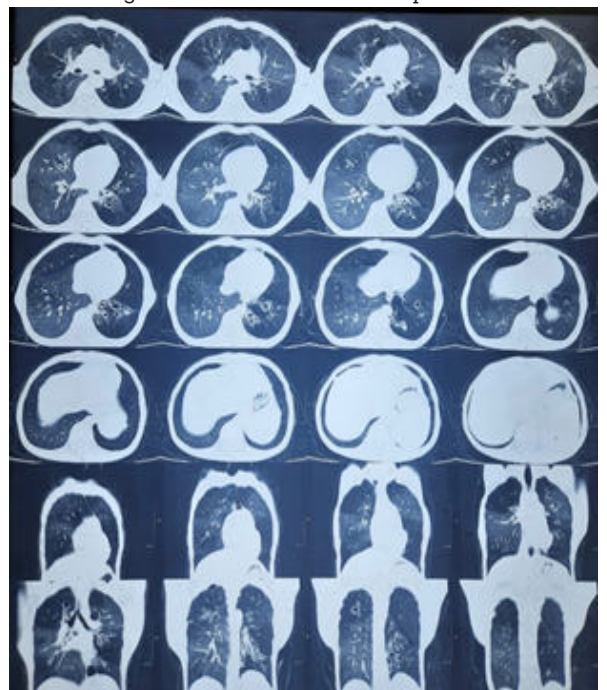
Actively motile- No actively motile sperm

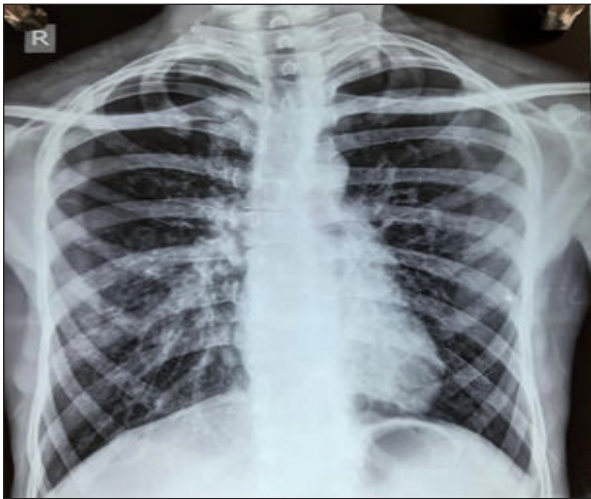
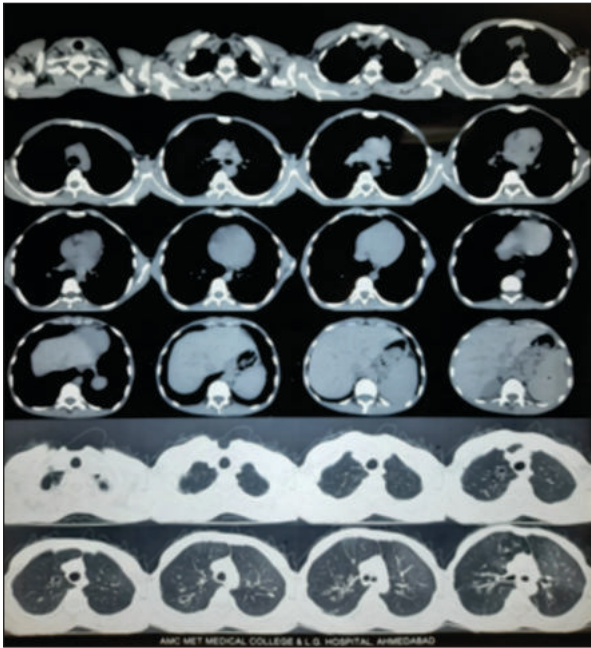
Sluggish motile- 10%

Non motile-90%

Fructose- present

Patient was treated symptomatically and with antibiotics according to culture and sensitivity of sputum and for infertility patient was counselled and explained About Fertility treatment, including surgery to remove the obstruction in the epididymis (vasoepididymostomy) or assisted reproduction, such as intracytoplasmic sperm injection (ICSI). then patient was discharged and with advice of follow up in medical OPD.





CONCLUSION

In our case patient had infertility,bronchiectasis, and recurrent sinusitis diagnosed with Young syndrome which is very rare.