ORIGINAL RESEARCH PAPER

Medicine

Volume - 7 | Issue - 2 | February - 2017 | ISSN - 2249-555X | IF : 3.919 | IC Value : 79.96

CONGENITAL MALFORMATIONS OF THORACIC STRUCTURES MASQUARADES COMMON PULMONARY DISEASES-A ONE YEAR CLINICAL EXPERIENCE, 2015-'16.

KEYWORDS: multiple cranial nerve palsies, ophthalmoplegia.

DR.BHARGAV PRASAD BATHULA
MD, ASST.PROFESSOR,DEPT.OF PULMONARY MEDICINE

DR.SUNEEL AVAGADDA
DNB,RADIOLOGIST,DEPT.OF RADIOLOGY

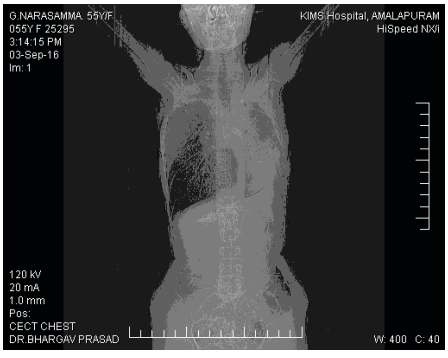
DR.UDAY KIRAN
MBBS 1st YR.PG STUDENT,DEPT.OF PUL.MEDICINE

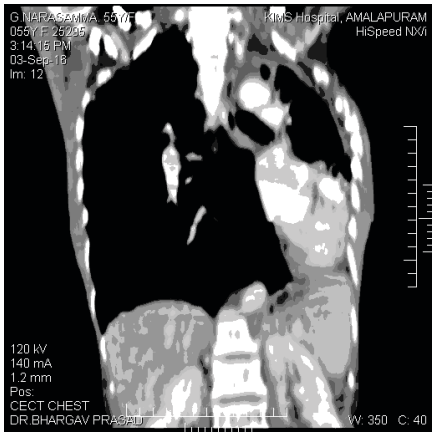
DR.KASI RAM
MBBS 1st.YR.PG STUDENT,DEPT.OF PUL.MEDICINE

PROF.SUBBA RAO P.
PROFESSOR & H O D, DEPT.OF PUL.MEDICINE

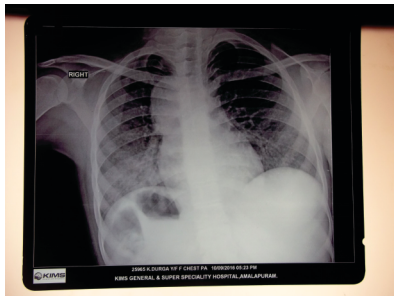
ABSTRACT A SERIES OF 3 CASES OF CONGENITAL MALFORMATIONS WERE FOUND WHICH RESEMBLES PULMONARY TUBERCULOSIS, ASPIRATION PNEUMONIA AND BRONCHIAL ASTHMA.

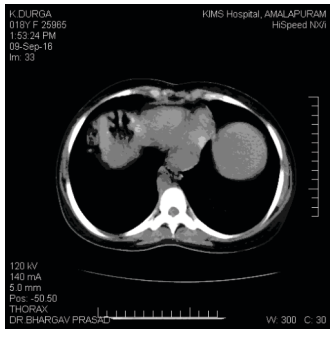
CASE-1, A FEMALE PATIENT CAME WITH MAINLY CHANGE OF VOICE .THE PATIENT WAS DIAGNOSED AS SMEAR NEGATIVE PUL.TB AND TREATED WITH 6 MONTHS OF ANTI-TB DRUGS AT GOVT.GENERAL HOSPITAL PREVIOUSLY.THE PRESENT CHEST X-RAY SUGGESTIVE OF DESTROYED LEFT LUNG WITH DIMINISHED VOLUME DUE TO PREVIOUS TB DISEASE.PATIENT WAS SENT TO ENT CONSULTATION AND FOUND AS BILATERAL RECURRENT LARYNGEAL NERVE PALSY WITH SUPERIOR LERYNGEAL N.PALSY AND LEFT VAGAL NERVE COMPLETE PALSY.WE REQUESTED FOR CECT CHEST AFTER ENT OPENION TO RULE OUT UNDERLYING LUNG PATHOLOGY.CECT CHEST PROVED AS HYPOPLASTIC LEFT LUNG WITH CYSTIC ADENOMATOID MALFORMATION ,TYPE-1 WITH ABSENT LEFT PULMONARY ARTERY.





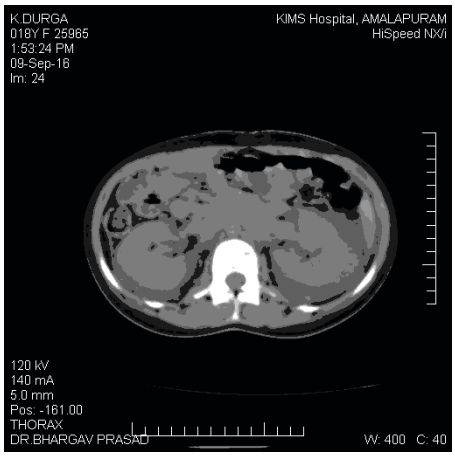
CASE-2,A FEMALE PATIENT OF 20 YEARS CAME WITH DYSPNEA AND RECURRENT EPISODES OF EPILEPTIC ATTACKS.PATIENT WAS KNOWN CASE OF EPILEPTIC,ON ANTI-EPILEPTIC DRUG FOR MANY YEARS.CHEST X-RAY WAS SHOWED BASAL INFILTRATIONS WITH SITUS INVERSUS.THIS CASE WAS ADMITTED AS CHRONIC EPILEPTIC DISORDER WITH ASPIRATION PNEUMONITIES.NCCT CHEST SHOWED SITUS INVERSUS AND INTERVENTRICULAR SEPTAL DEFECT. ECHOCARDIOGRAM ALSO COFIRMED THE SAME.

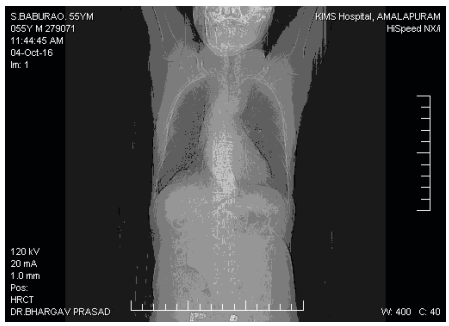


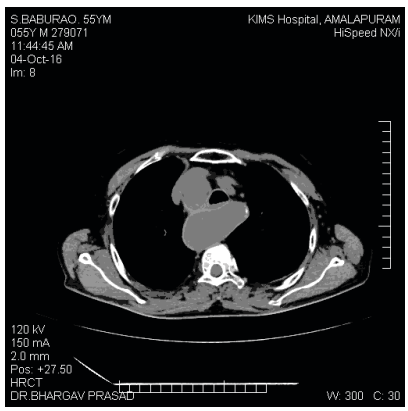


CASE-3, A MALE PATIENT AGED 55 YEARS COMPLAINING OF SEVERE COUGH,BREATHLESNESS.HE WAS ADMITTED IN SURGICAL WARD AND TRANSFERRED TO CHEST WARD FOR MANAGEMENT OF ASTHMA.CHEST X-RAY SHOWED RIGHT SIDED DENSE CONVEX PARA HILAR SHADOW SUGGESTIVE OF ENCYSTED MEDIATINAL PLEURAL EFFUSION.HRCT SHOWED RIGHT AORTIC ARCH,ABERENT LEFT SUB CLAVIAN ARTERY WITH KOMMEERELL'S DIVERTICULUM AT IT'S ORIGIN. MODERATE AIRWAY OBSTRUCTION IN SPIROMETRY AND UNDERLYING CONGENITAL PATHOLOGY ,WHICH COMPRESSING TRACHEA FROM POSTERIOR SIDE LEADS TO DYSPNEA.HE WAS FIT FOR SURGERY UNDER SPINAL ANEASHESIA ONLY.

Volume - 7 | Issue - 2 | February - 2017 | ISSN - 2249-555X | IF : 3.919 | IC Value : 79.96







DISCUSSION: CASE -1 WAS A 50 YR. OLD FEMALE INITIAL DIAGNOSIS WAS DESTROYED LEFT LUNG DUE TO OLD PUL. TUBERCULOSIS. BUT FINALL DIAGNOSIS WAS HYPOPASIA OF LEFT LUNG WITH ABSENT LEFT PULMONARY ARTERY.2ND CASE WAS DIAGNOSED AS POST-EPILEPTIC ASPIRATIONAL PNEUMONITIS .BUT IT WAS CYANOTIC CONGENITAL HEART DISEASE WITH SITUS INVERSUS.3RD CASE WAS BRONCHIAL ASTHMA BUT THIS PATIENT WAS SUFFERING FROM RIGHT SIDED AORTIC ARCH WITH KOMMEREEL'S DIVERTICULUM WHICH COMPRESSSING TRACHEA LEADS TO DYSPNEA. THESE CONGENITAL DISORDERS RESEMBLES COMMON PULMONARY DISEASES, AS IN 1ST CASE PUL. TB WITH DESTROYED LUNG,2ND CASE POST-EPILEPTIC ASPIRATION PNEUMONIA AND 3RD CASE OF BRONCHIAL ASTHMA .

CONCLUSION: BEFORE DIAGNOSING A COMMON DISEASE, UNCOMMON CONGENITAL THORACIC DISORDERS SHOULD BE SUSPECTED. HRCT THORAX IS NECESSARY TO RULE OUT THESE RARE CONDITIONS.