

Pulmonary Sequestration: A case report in an adult with Hemoptysis

Tatiana Valencia Castaño¹, Carlos A. Celis Preciado¹,
Javier Ivan Lasso Apraez¹, Luis Jaramillo².
Hospital Universitario San Ignacio, Bogotá, Colombia.

Introducción

Pulmonary sequestration is a rare congenital malformation; characterized by an abnormal mass of dysplastic lung tissue supplied by an anomalous systemic artery and without connection with the tracheobronchial tree.

Resultados

A 46 year old man was admitted to our hospital on the first time two years ago with history of fever, headache, cough with hemoptysis. Receiving full antibiotics for pneumonia, cavitated lesion was evidenced in left lower and was performed a bronchoscopy where there was no evidence of alteration in bronchial tree, was considered radiological follow-up after receiving pneumonia treatment.

He was readmitted six months later for cough and hemoptysis, with persistence of cavitated lesion in LII with irrigation by left bronchial artery; whereby it is taken to embolization with alcohol; and then percutaneous biopsy of this lesion was performed, which reports tissue without alterations, negative cultures for microorganisms including tuberculosis.

The patient was discharged after improvement of symptoms with an order to perform surgery on an outpatient.

At third attention, he patient was afebrile, with cough and persistent hemoptysis, and he did not dyspnea. Was performed new bronchoscopy is observed adhered clot to upper segment of the left lower lobe.

CT-Scan revealed a 52 x 26 x 29 mm dense consolidation in the lower lobe of left lung with cavitation inside.

Left lower lobectomy was performed; histologically, the findings show lung tissue with extensive areas of fibrosis, vessels with marked hypertrophy of the wall, trapped bronchial lumens, bronchiectasis with ulcerated epithelium and recent luminal hemorrhage, no granulomas or evidence of malignancy.

Postoperative histopathologic examinations confirmed that the lesion was an intralobar lung sequestration. Post Lobectomy had an uneventful recovery and at present leading a normal life 2 months after surgery.

Objetivos

To describe the case of an adult patient with recurrent hemoptysis due to pulmonary sequestration

Materiales y Métodos: N.A

Imágenes

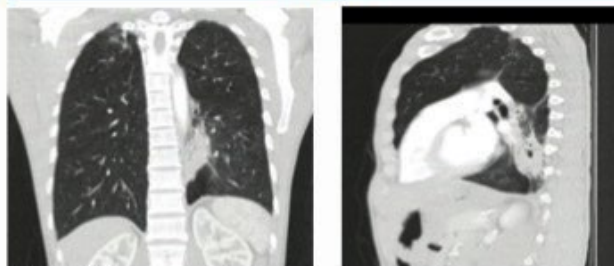


Figure 1a, 1b

High computed tomography resolution (HRCT) scan of the chest obtained in third hospitalization revealing dense consolidation in the lower lobe of left lung with cavitation inside.

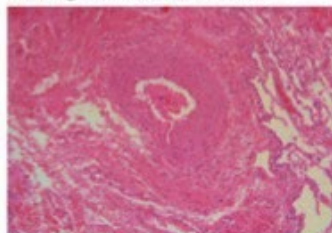


Figure 2-Pathology

lung tissue with extensive areas of fibrosis, vessels with marked hypertrophy of the wall, trapped bronchial lumens, bronchiectasis with ulcerated epithelium and recent luminal hemorrhage.

Conclusiones

Pulmonary sequestration is a rare entity especially in the adult population. There can be a vast array of manifestations ranging from asymptomatic patients to those that present with sequelae, such as recurrent pulmonary infections or hemoptysis.

Given the potential for recurrent and life-threatening hemoptysis in these patients, operative resection is the preferred approach.

Referencias

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