

INTRAPULMONARY LUNG SEQUESTRATION

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A 16-year-old female, without relevant previous medical history, presented with 1 year episodic and progressive hemoptysis. CT scan revealed an abnormal blood supply from the descending thoracic aorta to the left lower lobe, the later presenting with significant signs of hyperperfusion. Therapy consisted of ligation of the anomalous vessel followed by left lower lobe lobectomy.

Lung sequestration is a rare congenital pulmonary malformation, mostly diagnosed in childhood. The typical symptoms are recurrent pulmonary infections or productive cough and only in rare situations severe hemoptysis occurs. Preoperative planning with CT or MR angiography is important to identify the aberrant blood supply. The treatment of choice is surgical ligation of the feeding vessel in combination with lung resection.



Figure 1

CT angiography. Intrapulmonary lung sequestration of the left lower lobe with the aberrant arterial vessel originating from the descending thoracic aorta.

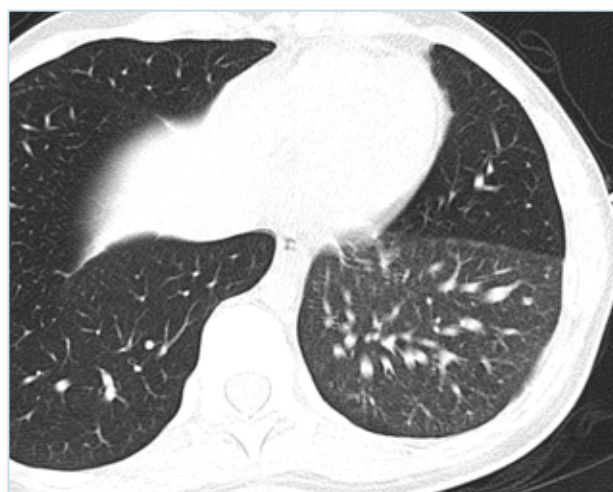


Figure 2

CT scan. Hyperattenuation of the left lower lobe, resulting from hyperperfusion by the anomalous systemic feeding vessel.