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VIDEO – ASSISTED THORACOSCOPIC LOWER LOBECTOMY IN A CASE WITH COMPLICATED CONGENITAL PULMONARY AIRWAY MALFORMATION (CPAM)

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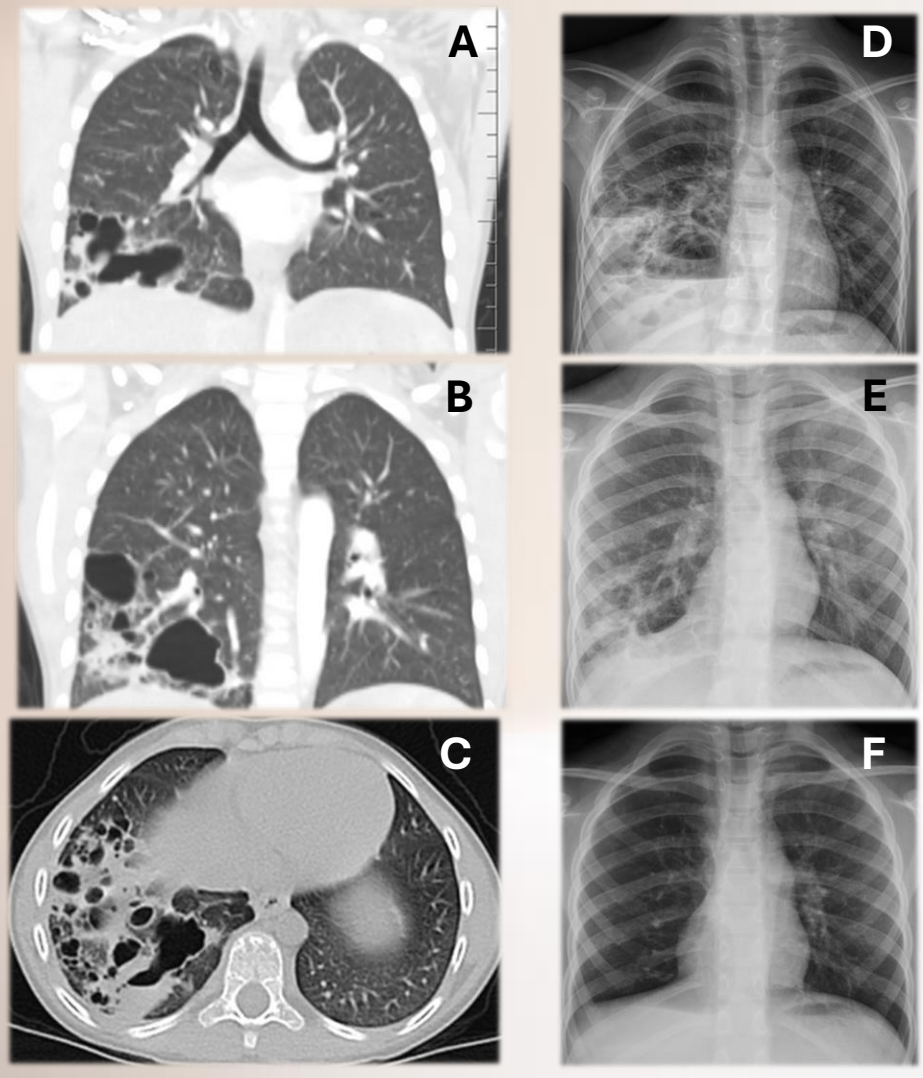
INTRODUCTION

CPAM is the most common congenital lung anomaly (~25% of al cases). It often presents with recurrent respiratory infections and can lead to complications such as pneumonia and abscess formation, necessitating surgical intervention.

We amed to present the surgical management and feasibility of thoracoscopic right lower lobectomy in an 8 year old girl with a complicated type 2 CPAM



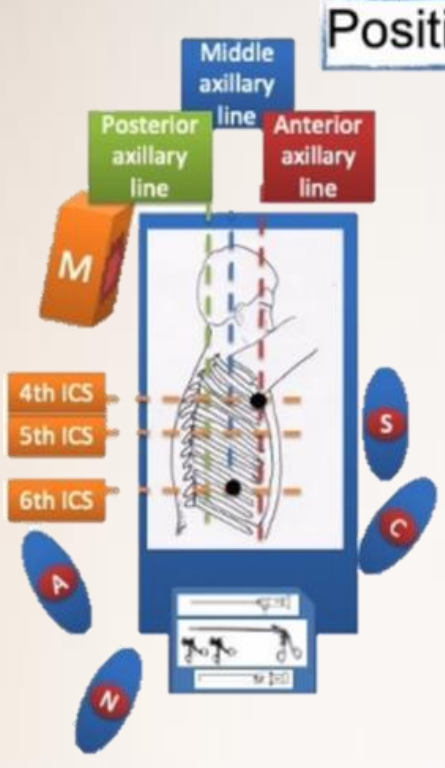
Figures A-C: CT image sections after pneumonia treatment
(A,B: Coronal sections; C: Transverse section).

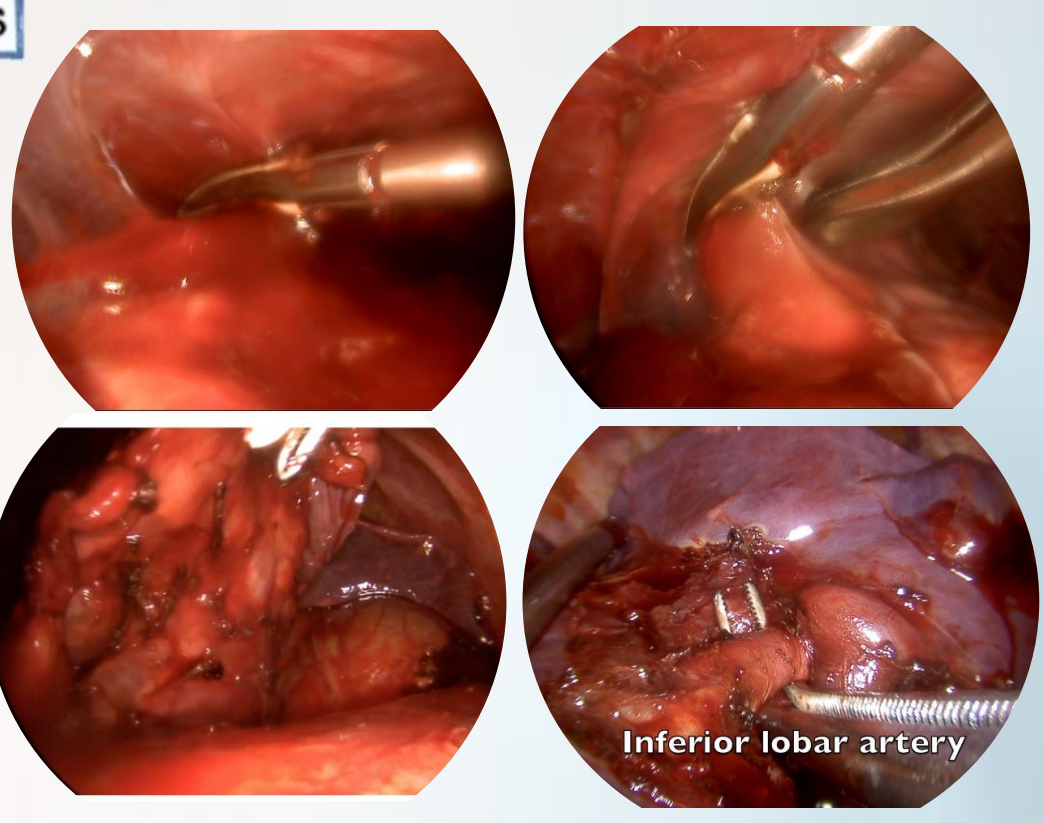
Figures D-F: Posterior anterior chest radiograph images
(D: First admission; E: After pneumonia treatment; F: Post-discharge follow-up)

CASE PRESENTATION

- 8 year old girl
- Admitted with a 2 week history of cough, fever, and a background of recurrent respiratory tract infections
- *CT:* Revealed multiple cysts and abscess formation in the right lower lobe
- Referred from an external center with suspected pneumonia and CPAM?

- *Management:*
  - First received medical treatment for the pneumonia
  - Control *CT* scan compatible with complicated type 2 CPAM
  - Thoracoscopic right lower lobectomy was performed
  - The thoracic tube was withdrawn on PO day 5
  - Discharged on the 6th PO day
  - Follow-up chest radiograph showed expansion of the right lung





In conclusion, CPAM should be considered in children presenting with respiratory distress and not responding to treatment after excluding common clinical conditions.