

A 3-year-old Girl with Recurrent Respiratory Tract Infections

Ozlem Kadirhan*, Sonay Aydin, A. Mecit Kantarci

Department of Radiology, Erzincan Binali Yildirim University Faculty of Medicine, Erzincan, Turkey

SECTION 1 – QUIZ

Case

A 3-year-old girl was referred to radiology clinic with complaints of cough, fever (38, 5°C), sputum production, and respiratory distress. It was learned that the patient was previously followed up in the hospital due to recurrent respiratory tract infections. Physical examination of the patient

revealed a decrease in respiratory sounds in the lower parts of the left lung during auscultation. Significant laboratory tests result: White blood cell count 16,350/ μ L, C-reactive protein 9, 8 mg/L. Ultrasonography (US) and a computed tomography (CT) was performed. On US a hyperechogenic,

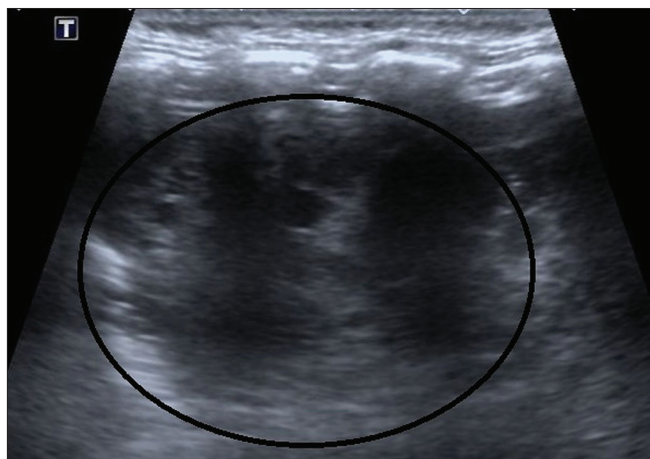


Figure 1: Axial sonography showing a cystic heterogen-hyperechogenic mass in the left lower lobe (inside circle)

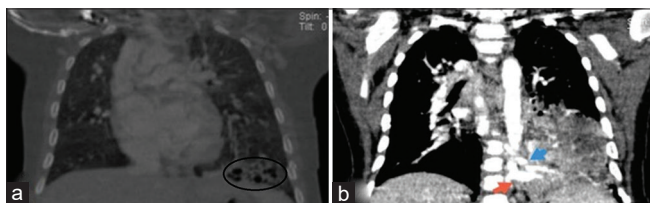


Figure 3: Coronal computed tomography image lung window (a) and soft-tissue window (b), There is a cystic mass in the left lower lobe (inside the circle), inside the lesion branches of thoracic aorta (red arrow) and pulmonary vein (blue arrow)

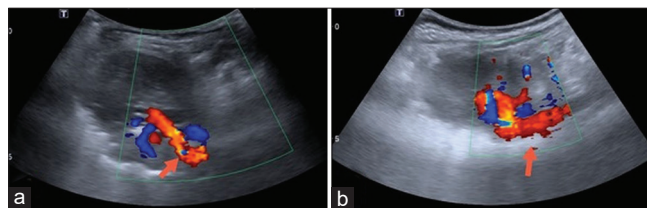


Figure 2: (a) Axial and (b) longitudinal color Doppler ultrasonography images showing blood supply of the lesion originating from the thoracic aorta



Figure 4: Axial computed tomography image, a cystic mass in the left lower lobe and a branch of the thoracic aorta (red arrow) extending into the lesion

Address for correspondence: Dr. Ozlem Kadirhan,
Department of Radiology, Erzincan Binali Yildirim University Faculty of
Medicine, Erzincan, Turkey.
E-mail: ozlemkadirhan@gmail.com

Received: 19-11-2020 Revised: 06-02-2021 Accepted: 11-03-2021 Available Online: 04-05-2021

Access this article online

Quick Response Code:



Website:
www.jmuonline.org

DOI:
10.4103/JMU.JMU_162_20

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

For reprints contact: WKHLRPMedknow_reprints@wolterskluwer.com

How to cite this article: Kadirhan O, Aydin S, Kantarci AM. A 3-year-old girl with recurrent respiratory tract infections. *J Med Ultrasound* 2022;30:74-5.

well-circumscribed mass, with cystic areas was detected in the basal part of the left lung [Figure 1]. On color Doppler US a branch extending from the thoracic aorta to the lesion was seen [Figure 2]. On CT images, branches of the thoracic aorta and the pulmonary vein extending toward the lesion were detected [Figures 3 and 4].

Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent forms. In the form, the legal guardian has given

his consent for images and other clinical information to be reported in the journal. The guardian understands that names and initials will not be published and due efforts will be made to conceal patient identity, but anonymity cannot be guaranteed.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.