

A case of bronchopulmonary sequestration

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Objective

Bronchopulmonary sequestration (BPS) associated with fetal hydrops is a serious complication with limited therapeutic options. We are presenting a case of a monozygotic diamniotic twin pregnancy with one of the fetuses being diagnosed with severe extralobar BPS and fetal hydrops.

Methods

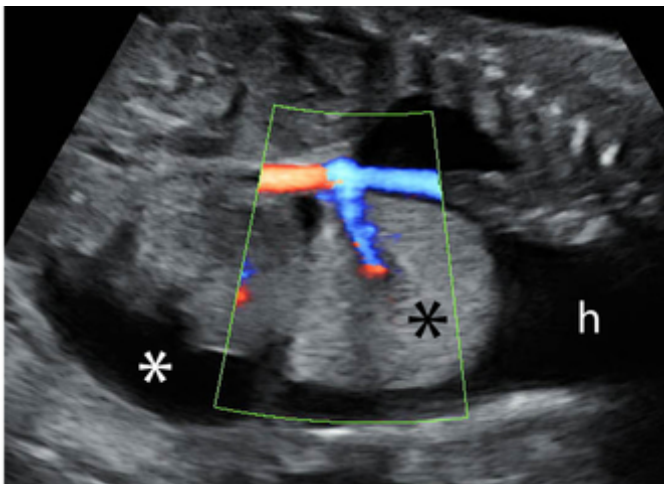
A case report.

Results

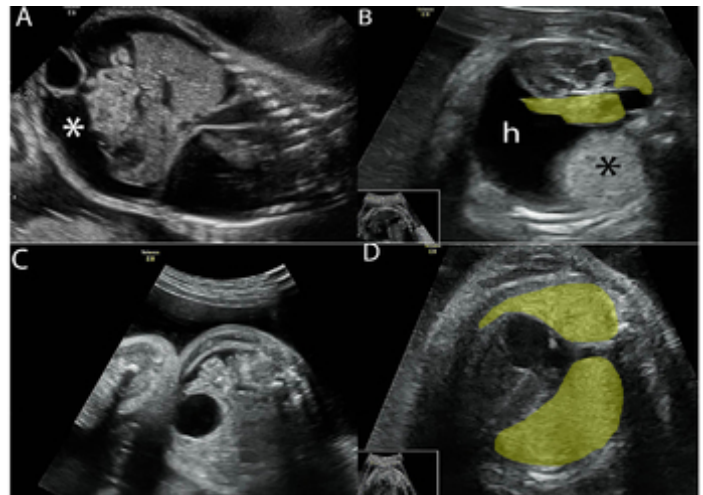
3 courses of betamethasone in one-week intervals were administered. After the second course, recovery from the severe fetal hydrops and reduction in the volume of sequestration were observed. The neonatal period was marked with respiratory complications in the BPS affected twin (respiratory distress syndrome, pulmonary haemorrhage, bronchopulmonary dysplasia). Follow-up at six months of corrected age revealed no side effects of the antenatally administered steroids for either of the twins. Moreover, the affected twin showed no respiratory problems and surgery of BPS has not been necessary so far.

Conclusion

Antenatal steroids might be considered as a less invasive therapy in high-risk- fetal patients with BPS, especially when fetal intervention is unsuitable or not available.



Parasagittal view: Lung sequester (black *) with feeding vessel from thoracic aorta, hydrothorax (white h), ascites (white *).



A: Parasagittal view before treatment. Ascites (white *), above diaphragm hydrothorax. B: Transverse view of thorax before treatment. Heart and hypoplastic lungs shifted to right hemithorax, hydrothorax (white h), lung sequester in left hemithorax (black *). C: Transverse view of lower abdominal cavity. Small amount of ascites persisting. D: Transverse view of thorax. Heart and distended lungs in normal position. Sequester not visible.