

Supravalvular pulmonary stenosis due to hydatid cyst



Hidatik kiste bağlı supravalvüler pulmoner darlık

Hydatid cyst is a parasitic disease caused by *Echinococcus granulosus*. The cysts may involve many organs, but they are mostly located in liver. Morbidity is usually secondary to free rupture of the echinococcal cyst (associated with anaphylaxis), infection of the cyst or dysfunction of involved organs. Hydatid cyst with pulmonary artery involvement is extremely rare.

A 33-year-old woman was admitted to our clinic with dyspnea, fatigue and palpitation, which had started for 1 month before admission. She had a history of migraine. On physical examination, there was a grade 3 midsystolic murmur over the left second intercostal space. Electrocardiography and chest radiography were normal. Two-dimensional transthoracic echocardiography short-axis views showed a pulmonary artery cyst (Fig. 1, Video 1. See corresponding video/movie images at www.anakarder.com). The cyst was well-demarcated and unilocular. The cyst wall was thickened and regular. Examination with continuous wave Doppler showed that there was a considerable mean

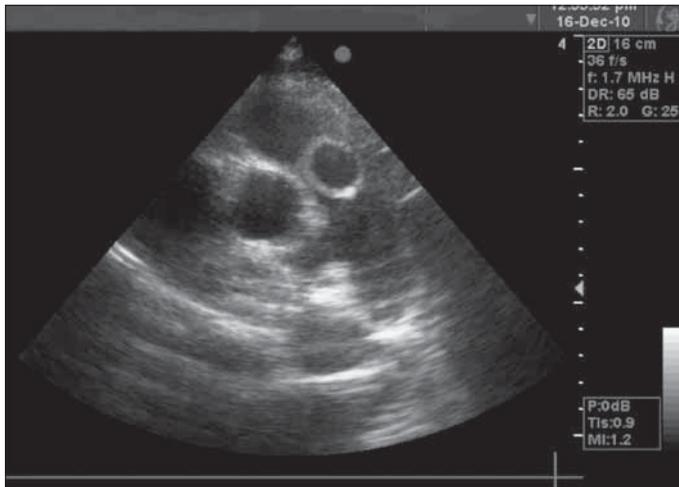


Figure 1. Short- axis echocardiography view of pulmonary artery cyst at the level of the pulmonary valve

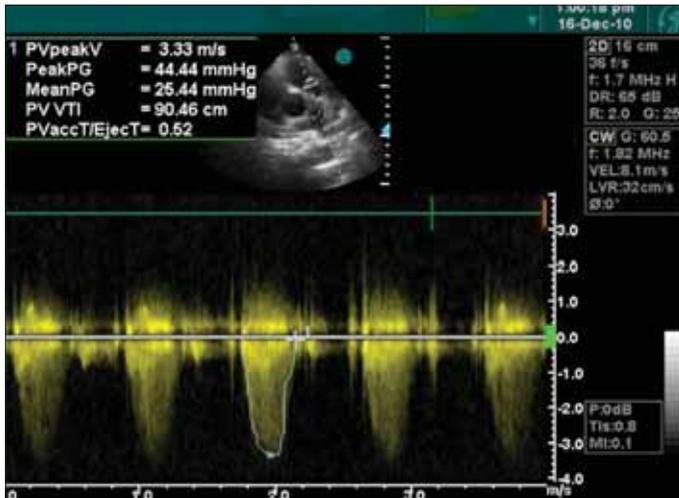


Figure 2. Continuous wave Doppler trace of the transpulmonary valvular mean gradient of 25 mmHg

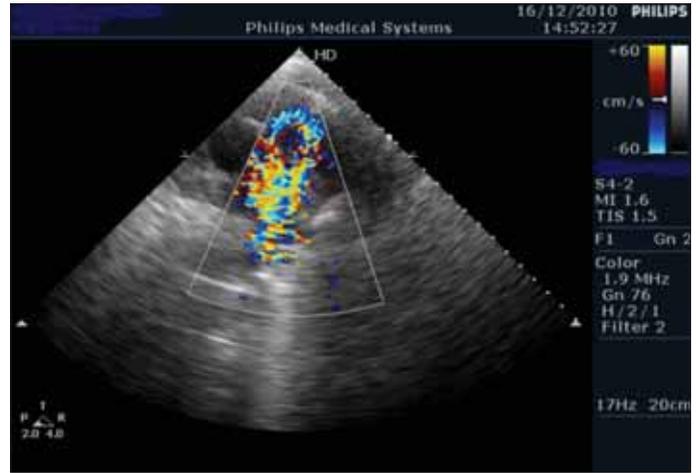


Figure 3. Transesophageal echocardiography color Doppler image of a pulmonary artery cyst



Figure 4. Transesophageal echocardiography view of a pulmonary artery cyst

gradient (25 mmHg) over the pulmonary artery cyst (Fig. 2). Transesophageal echocardiography examination was also confirmed a pulmonary artery cyst over the pulmonary valve (Fig. 3, 4). She was referred to a cardiovascular surgeon. After the proper preparation for surgery, the patient was operated and the cystic material was excision. Pathological examination showed that the cyst was echinococcal (hydatid). Post-surgical antiparasite chemotherapy, based on albendazole, was prescribed for the patient.

Murat Gençaslan, Durmuş Yıldırım Şahin, Mevlüt Koç, Mehmet Ballı, Mehmet Acıpayam*, Murat Çaylı
Departments of Cardiology and *Cardiovascular Surgery, Adana Numune Training and Research Hospital, Adana-Turkey

Address for Correspondence/Yazışma Adresi: Dr. Murat Gençaslan
Department of Cardiology, Adana Numune Training and Research Hospital, Adana-Turkey
Phone: +90 322 338 69 33 Fax: +90 322 247 26 54
E-mail: dr.muratgencaslan@hotmail.com

Available Online Date / Çevrimiçi Yayın Tarihi: 05.07.2011

©Telif Hakkı 2011 AVES Yayıncılık Ltd. Şti. - Makale metnine www.anakarder.com web sayfasından ulaşılabilir.
©Copyright 2011 by AVES Yayıncılık Ltd. - Available on-line at www.anakarder.com
doi:10.5152/akd.2011.125