Adult Diagnosis of Swyer James Mcleod Syndrome

Dr. Ajoy Samuel Mammen, MBBS, DTCD, DNB trainee, Dr. M. Deepaselvi, MD(Chest), DCH, Dr. Jesin Elsa Jose, MBBS, M.MED(Family Medicine, CMC Vellore)

A 50 year old gentleman from chennai got admitted with complaints of three year history of dyspnoea on exertion with recurrent pulmonary infections. Patient had history of exanthematous fever in childhood period. He was a non smoker and no family history of asthma. Physical examination revealed rhonchi, heard over both lung fields.

Chest skiagram showed hyperlucent right lung with pulmonary oligemia and small hilum. HRCT revealed air trapping and bronchietactic changes. CT pulmonary angiography showed decrease in size of the right pulmonary vessels and no evidence of any thromboembolism. Spirometry showed obstructive airway disease of moderate severity with significant reversibility. Fibre optic bronchoscopy showed normal tracheo-bronchial pattern.

Based on the above findings, diagnosis of adult swyer james mcled syndrome was made.

Chest Skiagram:
Hrct Chest

Hrct Chest Relieved Air Trapping And Bronchiectic Changes.

Contrast Ct Showing Narrowing Of Right Pulmonary Artery

Ct Pulmonary Angiography Showed Decrease In The Size Of Right Pulmonary Vessels And No Evidence Of Thromboembolism.