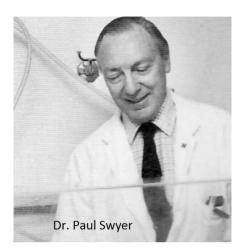
Adult Diagnosis of Swyer James Mcleod Syndrome

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 skia gram showed hyper lucent right lung with pulmonary oligemia and small hilum.HRCT revealed air trapping and bronchiectactic 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 tracheobronchial pattern

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

Chest Skiagram:

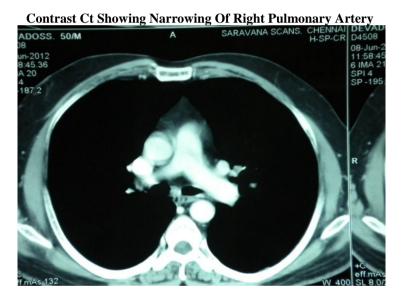


Hyperlucent Right Lung With Pulmonary Oligemia.

Hrct Chest



Hrct Chest Relieved Air Trapping And Bronchiectic Changes.



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

