Lung Sequestration (x-ray image)

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Pulmonary sequestration is a non-hereditary congenital malformation, occurring during pulmonary organogenesis, it is defined as a pulmonary territory characterized by a disconnection of any normal bronchial and vascular element, and whose vascularization is provided by an aberrant systemic artery [1,2] and it is either intralobar or extralobar [3].

Keywords: Lung Sequestration ; CT scan

Observation:

66-year-old patient, followed in urology for a renal lithiasis undergoing a left percutaneous nephrotomy with the fortuitous discovery during the abdominopelvic CT of a fluid formation of the LID in the thoracic sections. The exploration was completed by a thoracic CT which revealed a postero-basal pulmonary parenchymatous condensation of the right lower lobe containing cystic

![Figure 1: Thoracic CT in mediastinal (A) and parenchymal (B) window showing postero-basal pulmonary sequestration of the right lower lobe in its intralobar form type 3 of Pryce (red arrow), a patient of department of thoracic surgery, University Hospital Hassan II-Fes](image-url)
areas which directly receive its vascularization from the aorta containing some calcification, hypodense and which enhances after injection of the contrast medium measuring 5.5 cm evoking postero-basal pulmonary sequestration in its Pryce type 3 intralobar form.

The patient underwent an atypical resection of the sequestered pulmonary parenchyma after double ligation of the artery, the postoperative follow-up was simple.

References

