

# An Interesting Case of Congenital Diaphragmatic Hernia

## İlginç Bir Konjenital Diyafragma Fıtığı Olgusu

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Congenital diaphragmatic hernia (CDH) is a developmental closure defect characterized by the absence of diaphragm integrity or aperture in the diaphragm causing the abdominal organs to herniate from this opening. This pathological condition is also associated with severe pulmonary hypoplasia and pulmonary hypertension.<sup>1</sup> CDH is most commonly located in the left posterolateral region in 75-90% of the cases. It is found on the right side in 10-15% of the cases and bilaterally at the rate of 1-2%.<sup>1</sup>

A 17-year-old girl presented with cough and a runny nose. All systemic examination findings were normal except for the lungs. The patient has never had such complaints before. There was no trauma history in the anamnesis of the patient. On auscultation, respiratory sounds were missing in the lower and middle zones of the left lung. Thoracic CT showed that the diaphragm on the left side was not visualized and intestinal loops, spleen, and left adrenal gland were all herniated to the left hemithorax (Figure 1A, 1B, 1C, 1D). There was a decrease in left lung volume and hypoplasia in the upper lobe of the left lung. The upper lobe lingular segment of the left lung was seen as a separate lobe. There was a severe volume reduction in the lower lobe of the left lung. Subsegmentary atelectasis was detected in the lateral segment of the mid-

dle lobe of the right lung (Figure 2A, 2B). The pulmonary function tests revealed a severe restrictive pattern. Transthoracic echocardiography showed no abnormal findings. The patient had no problems secondary to herniation of the intra-abdominal organs.

CDH may present as an isolated structural defect or may be associated with additional anomalies (congenital heart defects, kidney, brain, and gastrointestinal system anomalies).<sup>2</sup> Our case was asymptomatic until the age of 17 due to absence of additional structural anomalies.

### Source of Finance

*During this study, no financial or spiritual support was received neither from any pharmaceutical company that has a direct connection with the research subject, nor from a company that provides or produces medical instruments and materials which may negatively affect the evaluation process of this study.*

### Conflict of Interest

*No conflicts of interest between the authors and / or family members of the scientific and medical committee members or members of the potential conflicts of interest, counseling, expertise, working conditions, share holding and similar situations in any firm.*

### Authorship Contributions

*This study is entirely author's own work and no other author contribution.*

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Peer review under responsibility of Türkiye Klinikleri Cardiovascular Sciences.

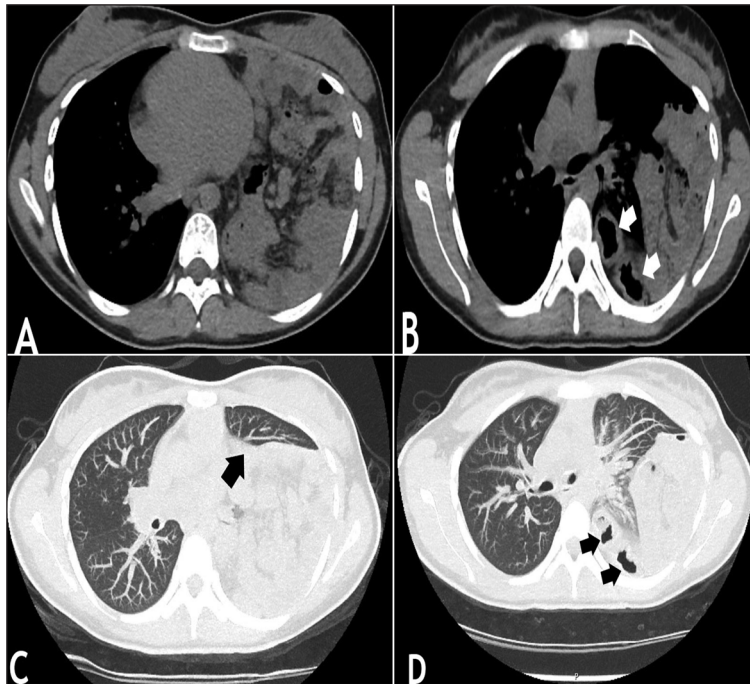
**Received:** 13 Dec 2019

**Received in revised form:** 21 Jan 2020

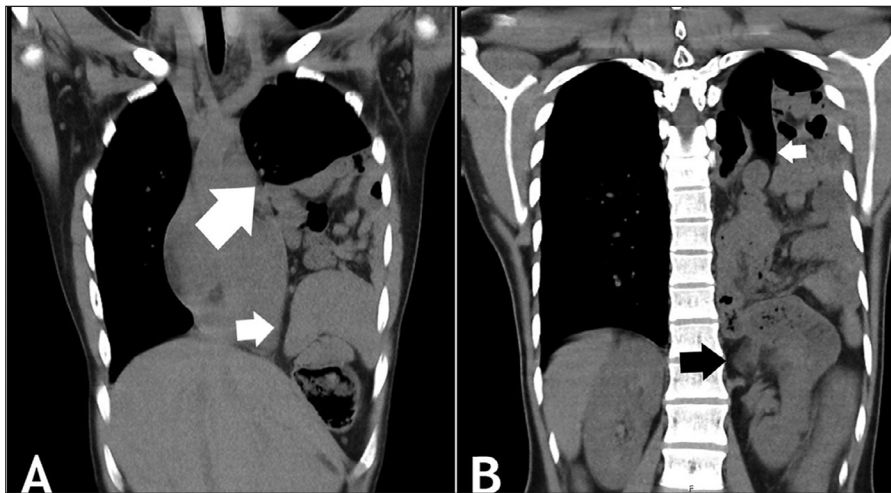
**Accepted:** 13 Feb 2020

**Available online:** 14 Feb 2020

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**FIGURE 1:** A) Herniated abdominal organs appear in the left thorax, B) Image of bowel loops in left thorax (white arrows), C) Hypoplastic left lung image (black arrow), D) Image of bowel loops in left thorax (black arrows).



**FIGURE 2:** A) Hypoplastic left lung image (big white arrow), Spleen and intestines in left thorax (small white arrow), B) Hypoplastic left lung image (white arrow), Image of left kidney in left thorax (black arrow).

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