

肺動脈擴張類似肺腫瘤引發迴旋喉神經麻痺—病例報告

Left recurrent laryngeal nerve palsy caused by dilatation of pulmonary artery simulating lung cancer: a case report.

陳保羅

Chan P;Chen LK;Lee YH.

摘要

一般而言，肺動脈擴張應不致和肺動脈腫瘤混淆。本文報告一特殊病例，為一位 25 歲女性病人，因有先天性心房縱膈缺損及肺動脈極度擴張而引致聲音沙啞，被認為是肺腫瘤。經詳細判讀胸部 X 光，發現與心臟血管構造有關而施行心導管檢查顯示病人肺動脈兩倍大於主動脈也合併有心房縱膈缺損。因其心臟衰竭症狀也甚明顯，故施行手術，將心房縱膈修補，術中所見和心導管檢查完全吻合，並無肺部腫瘤，術後半年聲音沙啞也消失。所以建議病人若有聲音沙啞及胸部 X 光片看似有腫瘤存在，心臟血管疾病應被列為鑑別診斷。

Abstract

We presented a case of a 25-year-old female who, having suffered from hoarseness for almost one year and heart murmur, was referred under the impression of lung cancer and congenital heart disease. Anteroposterior and lateral chest X-ray showed cardiomegaly with an oval mass lesion (6cm in length) at the left hilum. Cardiac catheterization showed large atrial Septal defect with aneurysmal dilatation of pulmonary artery, which was confirmed by operation for closure of ASD. Radiographically, postoperative regression of heart size and pulmonary artery was noted clinically, and disappearance of hoarseness was noted 6 months after operation.

1