CASE REPORT

DEXTROCARDIA ASSOCIATED WITH LEFT HEMIDIAPHRAGMATIC EVENTRATION

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Department of Paediatrics and *Department of Surgery, Ayub Medical College, Abbottabad A rare case of dextrcardia in association with eventration of left hemidiaphragm who failed to thrive is presented. Growth retardation could not be attributed to these congenital anomalies.

INTRODUCTION

Dextrocardia is the condition where heart is positioned on right side and apex beat is also palpable on the right. It may present as isolated entity or as combination of asplenia/polysplenia syndromes or situs inversus. The first case of dextrocardia was reported in a male in 1906. Dextrocardia in association with diaphragmatic eventration and other anomalies e.g. hypoplasia of right lung has also been documented. Here we report a case of dextrocardia associated with left hemidiaphragmatic eventration.

CASE REPORT

A six years old male presented with failure to thrive. He was born as first of the twins while the other, a female, grew healthy and normal. His birth size was reported as small. His weight remained static at 13 kg for the last two years. He measured 105.5 cm high with head circumference of 46.5 cm and mid arm circumference of 12.5 cm. His cognitive functions were adequate for age and did not show any other neurological deficit. Rest of systemic examination was unremarkable except that his apex beat felt on the right side. Routine chest X-ray (Fig. 1) showed cardiac shadow on the right and elevated left diaphragm with prominent gas shadow underneath it. A diagnosis of dextrocardia associated with eventration of left hemidiaphragm was confirmed on barium meal x-ray (Fig. 2) and echocardiogram. Further enquiry revealed that an earlier sibling suffered from Arthrogryposis Multiplex Congenita and died at the age of four years. There was no history of congenital anomalies in rest of the kins.

DISCUSSION

Dextrocardia with isolated hemidiaphragmatic eventration is rarely encountered in literature. Jroundi et al described a case of dextrocardia with localized right diaphragmatic eventration.²

Dextrocardia with other anamolies of diaphragm e.g diaphragmatic hernia has been reported in literature causing symptoms due to diaphragmatic condition. However, eventration of diaphragm is usually an asymptomatic condition.³

In this case presenting complaints were failure to thrive and the congenital anomalies of dextrocadia and eventration of left hemidiaphragm were discovered incidentally. Malone et al have also reported cases with diaphragmatic eventration presenting with failure to thrive. The reason for failure to thrive have not been explained in documented cases. The same is true in this case as well.

Figure-1:	Chest	X-rav

Figure-2: Barium Meal X-ray

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