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Case report

RIGHT SIDED CONGENITAL DIAPHRAGMATIC HERNIA: A RARE CASE REPORT

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ABSTRACT

A diaphragmatic hernia is defined as a communication between abdominal and thoracic cavity with or without abdominal contents in the thorax. The true incidence of Congenital diaphragmatic hernia is 1 in 5000 live births while right side diaphragmatic hernia (15%) is rare comparing to left side diaphragmatic hernia (85%) because liver plugs the opening. Congenital diaphragmatic hernia typically refers to Bochdalek form, other forms are rarer. Despite advances in neonatal intensive care, congenital diaphragmatic hernia is associated with high mortality and morbidity. The posterolateral right congenital DH is a rare diaphragmatic defect. Females are twice affected than that of males. The symptoms are non characteristic and patients with this disease maybe without symptoms for a long period. The main tool for diagnosis of congenital DH is radiography. Surgical correction is required.

Keywords: Right sided congenital diaphragmatic hernia, Posterolateral, Liver plugs at right side

INTRODUCTION

A diaphragmatic hernia is defined as a communication between abdominal and thoracic cavity with or without abdominal contents in the thorax. Right side diaphragmatic hernia (15%) is rare comparing to left side diaphragmatic hernia (85%) because liver plugs the opening. Congenital diaphragmatic hernia typically refers to Bochdalek form, other forms are rare. The posterolateral right congenital DH is a rare diaphragmatic defect. Females are twice affected than that of males. The symptoms are non characteristic and patients with this disease maybe without symptoms for a long period.¹

CASE REPORT

A male neonate, born in a private hospital to non-consanguineous parents 36th week of gestational

age, preterm, appropriate for gestational age (birth weight 2300 gms, was brought to our hospital on 1 day of life with complaints of respiratory distress and noisy breathing. Patient had tachypnea, grunting, air entry absent over the right hemithorax along with Peristaltic sounds heard over right hemi thorax. Chest X ray shows Presence of bowel loops and liver in the right hemi-thorax. Left lung showed nearly complete expansion, Arterial Blood gas analysis showed features of respiratory acidosis, other investigations were within normal limits. The neonate was referred to neonatal surgical unit for surgical correction, after stabilization.



Fig 1: Chest X ray shows Presence of bowel loops and liver, in the right hemi-thorax. Left lung showed nearly complete expansion

DISCUSSION

A diaphragmatic hernia is defined as a communication between abdominal and thoracic cavity with or without abdominal contents in the thorax. The true incidence of Congenital diaphragmatic hernia is 1 in 5000 live births.¹ Right-sided diaphragmatic hernia (15%) is rare, compared to left-sided diaphragmatic hernia (85%) because liver plugs the opening. Congenital diaphragmatic hernia typically refers to Bochdalek form, other forms are rarer.² Malformation of diaphragm allows the abdominal organs to push into proper lung formation despite advances in neonatal intensive care; congenital diaphragmatic hernia is associated with high mortality and morbidity due to two complications namely pulmonary hypoplasia and pulmonary hypertension.² The posterolateral right Congenital Diaphragmatic Hernia is a rare diaphragmatic defect. Females are twice affected than that of males.¹ Newborns with CHD often have severe respiratory distress which can be life threatening unless diagnosed and treated early.^{3,4} The symptoms are non characteristic and patients with this disease maybe without symptoms for a long period. The main tool for diagnosis of congenital DH is radiography. Surgical correction is required. ECMO has been used as a part of treatment strategy in some hospitals.³

CONCLUSION

Diaphragmatic hernia is the congenital anomaly that manifests itself since birth in the form of severe respiratory distress. Suspicion of the condition and

early diagnosis is necessary in such situation; surgical correction is the treatment modality.

Conflict of interest: Nil

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