P-90

Successful surgical management for cyanotic congenital heart disease complicated with pulmonary aspergillosis. - A case report

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Introduction: Pulmonary aspergillosis complicated with cyanotic congenital heart disease is rare, but known to have a quite poor prognosis. We experienced a successful surgical case with truncus arteriosus and major aortopulmonary collateral artery (MAPCA) who was performed primary Rastelli procedure after thoracoscopic lobectomy for progressed pulmonary aspergillosis.

Case report: A 17-year-old female with naïve truncus arteriosus and MAPCA had repetitive hemoptysis because of progressed left pulmonary aspergillosis that was refractory to antibiotics therapy. Cardiac catheterization found developed collateral vessels around the cavity lesion of aspergillosis associated with poor pulmonary perfusion area, and also an indication of primary Rastelli procedure with developed bilateral pulmonary vascular bed without pulmonary hypertension. After coil embolization on collateral vessels, left upper lobectomy was performed under thoracoscopic surgery, and primary Rastelli procedure with unifocalization of MAPCA was performed 2 weeks later. Postoperative course was good without cyanosis, pulmonary hypertension and the recurrence of pulmonary aspergillosis.

Conclusions: This is a first report of successful surgical management for pulmonary aspergillosis complicated with cyanotic congenital heart disease.