Cough and Hemoptysis in Children in India: Is it Always Tuberculosis? Any Alternative Diagnosis?

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INTRODUCTION

Hemoptysis in a child has got many causes due to prevailing situation in our country where diagnosis of Tuberculosis is made without any rigorous work up and proper application of mind. ATT is prescribed to any child based on clinical symptomatology. Here we report a case presenting to our hospital with history of on and off hemoptysis. After intensive work up we came up with an alternative diagnosis of Idiopathic right pulmonary artery agenesis. This case represents our pitfall of modern day prescription habits.

CASE REPORT

A 7 year old female presented to us with history of hemoptysis for last 5 years. On General Examination, child had pectus carinatum and decreased air entry in the right lung field. The child was given ATT 1 year back by private practitioner but there was no relief in symptoms. Chest X ray showed collapse on right side. CECT thorax and Pulmonary Angiography were done which revealed Right pulmonary artery agenesis.

CONCLUSION

Unilateral absence of pulmonary artery is a rare congenital anomaly which might escape clinical detection because it is unilateral and isolated. Hemoptysis is due to excessive systemic collateral circulation. Therefore this diagnosis should always be kept in mind in patients presenting with recurrent respiratory symptoms. Early diagnosis can prevent further deterioration and associated morbidities.

KEY WORDS

Hemoptysis, tuberculosis, pulmonary artery agenesis.