Remission of Atelectasis Based Congenital Bronchial Stenosis in VLBWI

Masatoshi Nakamura^{1,2)}, Kouzi Ide¹⁾, Mariko Morii^{1,2)}, Takashi Setoue^{1,2)}, Makoto Tsutsumi^{1,2)}, Chizuru Hashiguchi^{1,2)}, Shinkai Inoue^{1,2)}, Ryutaro Kinoshita^{1,2)}, Eiji Ohta^{1,2)}, Toshiko Mori^{1,3)}, Shinichi Hirose^{1,2)}

Abstract: Atelectasis can lead to congenital bronchial stenosis while also sometimes developing into pulmonary infection. Recurrent pulmonary infections require a pneumonectomy. A newborn female presented with very low birth weight and was delivered at 27 weeks 4 days gestation. She weighed 1152 g and had an Apgar score of 2 points (at one minute) and 6 points (at 5 minutes). She was intubated at birth and given an intratracheal injection of ST-A, followed by respiratory care. A chest X-ray taken at birth showed atelectasis in section S6 of the left lung; it remained after one year. The infant remained intubated for 30 days after birth, thereafter her breathing stabilized and she was discharged from the NICU at 118 days. physiotherapy was continued during ambulatory treatment at home with the help of her parents. A chest X-ray showed that her atelectasis had disappeared one year after birth. Family administered physiotherapy proved to be an effective remedy and surgical treatment was thereby avoided.

Key words: Bronchial stenosis, Atelectasis, Newborn, VLBWI, physiotherapy

¹⁾ Department of Pediatrics, Faculty of Medicine, Fukuoka University

²⁾ Division of Neonatology, Center for Maternal, Fetal and Neonatal Medicine, Fukuoka University Hospital

³⁾ Department of Pediatrics, Fukuoka Sanno Hospital