ABSTRACT

A CASE OF ABNORMAL BRANCHING OF THE TRACHEA

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A case of abnormal bronchus in right lobe, so called "Abnormal Branching of the Trachea", that had been seen on 43 years old male, was presented.

The patient suffered with the bloody sputa and hemoptysis for a couple of months before admission. After doing a bronchoscope and bronchography as a routine test for respiratory diseases, this abnormal branching of the trachea was clearly diagnosed together with the bronchiectasis localized in the right upper lobe, which was thought to be the cause of the bloody sputa and hemoptysis. When the lobectomy was performed successfully, an abnormal bronchus (B_{1+3}) branched directly from the trachea was confirmed to be parallel with B_2. Discussion is focuse on the embryological mechanism of abnormal bronchus formation.

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ATRIOVETRICULAR BLOCK CAUSED BY SARCOIDOSIS

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Four cases of atrio-ventricular (A-V) block caused by sarcoidosis are reported in this paper.

(1) A 51-year-old female. The patient complained of frequent syncope attacks with palpitation and chest pain for these several years. The first grade A-V block was observed on the first admission. The treatment with isoproterenol was satisfactorily maintained for one month. Then she was discharged. Two months later, she was readmitted on emergency due to Stokes-Adams syndrome. Because of the insensibility to isoproterenol, bradycardia was under control successfully of the implantation of artificial pacemaker. Paroxymal tachycardia with angina-like chest pain developed after the implantation and the patient was treated with propranolol with satisfaction. For 5 months following the second discharge, she had been enjoying the ordinary social life under the control of bradycardia by the pacemaking and of tachycardia by the propranolol administration. She died suddenly and autopsy findings revealed sarcoid lesions scattering in the lymph nodes, heart, lungs, spleen, kidneys and liver. The sarcoid invasion was remakable in the heart and the myocardium appeared damaged seriously by the sarcoid granulomas. It deserves emphasis that the stenoiss at the orifice of the coronary artery irrigating the a walnut-sized fibrous lesion of myocardium was caused by the sarcoid invasion into the media of coronary artery.

(2) A 57-year-old male. The patient who had been diagnosed as RBBB 3 years ago was admitted with the chief complains of dyspnea, edema and heart dilatation. On the 79th day of hospitalization, he suddenly died of a atrial tachycardia attack. Multiple sarcoid granulomas were found in the lymph nodes, lungs, spleen, kidneys, prostates and aorta.

(3) A 27-year-old male. The BHL was found on a chest X-ray film on routine physical examinations. Sarcoid lesions were found in the scalene lymph node biopsy specimens. Four years later, he was admitted with enlargement of the heart, atrial fibrillation, bradycardia and opening snaps with diastolic rumble murmur audible at the heart apex. It was diagnosed as mitral stenosis with complete RBBB. Mitral commissurotomy and implantation of artificial pacemaker were performed successfully. Now he is in good health.

(4) A 44-year-old male. The patient had had dyspnea for 3 years. Clinical examinations revealed that he had atrial extrasystole, atrial fibrillation and severe A-V block. The BHL was demonstrable on chest X-ray films and the Kveim test was positive.

Cases on heart sarcoidosis with conduction disturbances which probably caused the sudden

deaths of patients were reported. On this standpoint of view, sarcoidosis should always be kept in mind cases of heart diseases with unknown etiology. Even in cases of diagnosed sarcoidosis with BHL and positive Kveim test, the possibility of involvement of the heart by sarcoid should be beared in mind as sarcoidosis is a systemic disease. It is also worthy of note that sarcoid lesions could be invasive to the coronary artery as indicated in the first case of this report and, therefore, the possibility of sarcoid lesions to be the cause of myocardial infarction following coronary stenosis must be considered.