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Right-Sided Pneumothorax After Thoracotomy and One-Lung Ventilation in an Adult With Recurrent Left-sided Congenital Diaphragmatic Hernia

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Diaphragmatic hernias are well described in the pediatric patient population, occurring with an incidence of about 1:2000 to 1:4000 live births. As such, surgical and perioperative management of these patients and their complications is well studied and understood by pediatric subspecialists. When diagnosed in adults, however, diaphragmatic hernias present a significant clinical challenge to anesthesiologists, as there have been less than 150 cases ever described in medical literature. We report a case involving a 37-year-old man with a recurrent left-sided congenital diaphragmatic hernia who underwent unsuccessful attempt at surgical repair. The patient’s anesthetic course was complicated by inadequate oxygenation while attempting one-lung ventilation and a right sided pneumothorax diagnosed on postoperative chest x-ray. After this case study the reader will be able to discuss the clinical presentation, pathophysiology, and treatment options of diaphragmatic hernias as well as the unique challenges faced by anesthesiologists during perioperative management of these patients.