## PV5: THE ASSOCIATION OF CERVICAL BRONCHOGENIC CYST WITH EXTRALOBAR PULMONARY SEQUESTRATION IN AN INFANT: PREVIOUSLY UNREPORTED ENTITY

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**Background** Bronchogenic cyst is a congenital malformation of the embryonic foregut defined by the presence of respiratory-type epithelium lining the cyst. It is usually located in thorax though rarely can be seen in extrathoracic locations such as abdomen and the neck. To the best of our knowledge the association of cervical bronchogenic cyst with mediastinal extralobar pulmonary sequestration has not been reported. We present a 18 month old infant with a mediastinal mass extending to cervical region and underwent both thoracoscopic and servical excision of the mass which found to have histopathologic findings consistent with cervical bronchojenic cyst and pulmonary sequestration.

**Materials and methods** 18-month-old male infant presented with a intrauterine diagnosis of mediastinal mass extending to the cervical region and respiratory difficulty.

**Results** This case accentuates the previously unreported coexistence of a two rare congenital anomaly, cervical bronchogenic cysts and extralober pulmonary sequestration and also the benefits of thoracoscopic surgery in management of these complex anomalies.

**Conclusions** The MRI revealed a multicystic lesion with a size of 51x64x56 mm, involving thymus, filling the upper part of the left hemithorax and extending to the neck, Preoperative radiologic diagnose was thymic cyst

Thoracoscopy showed a 5x6 cm mediastinal mass which was separate from thymus and had a feeding artery originating from arcus aorta and venous drainage to subclavian vein. The mediastinal mass was excised and removed thoracoscopically. Cervical mass could not be reached from thorax and neck exploration from a 2 cm cervical incision was done. There were two separate cystic structures with a size of 3.5x2,5cm and filled with white pale mucoid fluid which were densely adherent to trachea. Histopathologic evaluation of the mediastinal mass revealed pulmonary sequestration and cervical mass revealed a cytic structure lined by respiratory-type epithelium and including mucinous glands, mature cartilage and smooth muscle fibers in the cyst wall. These findings were consistent with a bronchogenic cyst.

**Key words** bronchogenic cyst, extralobar pulmonary sequestration, infant