IS-3  Outcome of the antenatally diagnosed Congenital Cystic Adenomatoid Malformation

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Congenital cystic adenomatoid malformation of the lung (CCAM) is often diagnosed antenatally by ultrasound. We report 5 cases of CCAM antenatally-diagnosed since 1991.

Results: The mean gestational age at diagnosis was 22 weeks (range 19-25). There was neither sex nor side predilection. In one patient diagnosed at 25 weeks gestation, the CCAM had disappeared by 35 weeks. There were two Type I and two Type II lesions (Stocker classification). All 5 cases were the macrocystic type as classified by Adzick. One lesion diagnosed at 22 weeks gestation with severe mediastinal shift and fetal hydrops required fetal treatment. The lesion was tapped several times and the fetus was delivered at 35 weeks gestation. He died of a tension pneumothorax shortly after birth without lung hypoplasia. Four fetuses were delivered by cesarian section and one vaginally. Four patients survived and one, noted above, died.

Conclusion: Fetal intervention for CCAM is recommended only in cases of fetal hydrops. Some patients with CCAM disappeared during pregnancy. A mediastinal shift and pulmonary compression may benefit from in utero decompression to decrease the risk of severe pulmonary hypoplasia. However, such fetal intervention carries a high risk of pneumothorax after delivery.