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Clinical Image

Acute Chest Syndrome in A 10-Year-Old Male with Sickle Cell Disease

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Case Presentation

A 10-year-old male with known sickle cell disease was admitted to Children's Damascus University Hospital with a history of tightness, shortness of breath, severe chest pain, and back pain for 2 days.

On physical examination, he had crackles with slightly diminished breath sounds on the base of both sides of the chest. Oxygen saturation was 94% on room air. The patient was hemodynamically stable.

Investigations revealed hemoglobin of 8.4 mg/dl and total leucocyte count of 16,000/mm3 (Polymorphs 78%, lymphocytes 16%). CXR showed lateral opacity in the right mid- and lower- lung field and lateral opacity in the left mid-lung field (Figure 1). Chest computed tomography images showed bilateral consolidations predominating at lung bases (Figure 2,3).

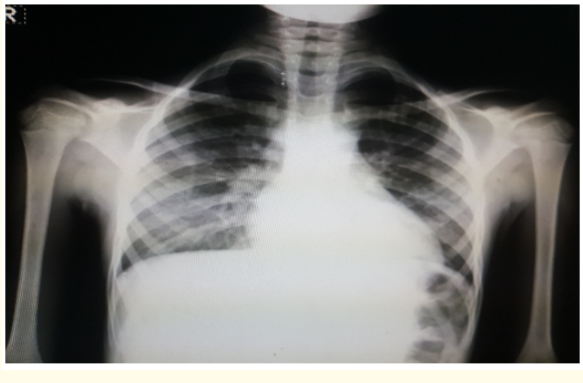

Figure 1

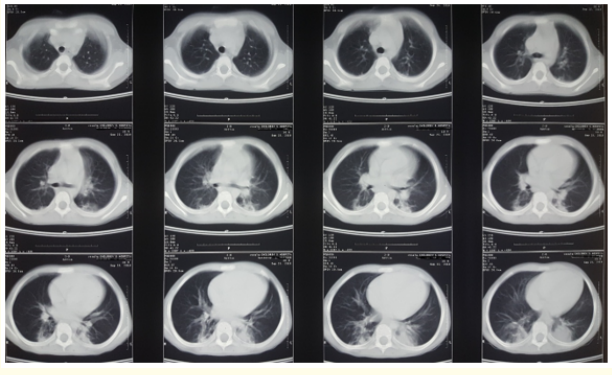

Figure 2

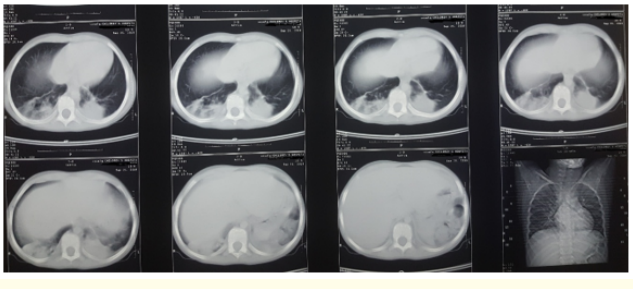

Figure 3

A diagnosis of acute chest syndrome (ACS) was made and the management included analgesics, intravenous fluids, oxygen, wide spectrum antibiotics and red blood cell transfusion.

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