Hemoptysis in Mitral Stenosis – Could It Be Due to a Co-Existent Aspergilloma?

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CLINICAL IMAGES
A woman aged 42, diagnosed to have rheumatic mitral stenosis with pulmonary hypertension presented to the Medicine outpatient department with recurrent hemoptysis of 3 days had corroborating features of mitral stenosis on examination1. Chest roentgenogram showed non homogenous opacities with areas of break down in the right lower zone suggestive of consolidation. Further computer tomographic images revealed large right lower lobe cavity with fluffy opacities, gravitating with change of position (image - 1), suggestive of aspergilloma2. The usual causes for hemoptysis in mitral stenosis are pulmonary oedema, pulmonary apoplexy and pulmonary infarction1. Coexistent pulmonary aspergillosis is probably the reason for hemoptysis, or could just be a clinical coincidence, in this case of mitral stenosis with pulmonary hypertension. As she was medically unfit for major thoracic surgery or intra-cavitatory antimycotic instillation, oral antifungals were initiated and had good symptomatic response on review after two months of discharge3. Though we could not do a CT angiography to prove the source of bleed, it is important to consider and explore possible causes for bleeding, either related or unrelated to the existing disease or its complication.

![CT Images of Thorax](image1)

**Image 1**
CT images of thorax. The image in left panel showing lung cavity situated in the right lower lobe with fluffy mass in situ (marked as write headed arrow) in supine position and right panel shows its gravitation (marked as left headed arrow) in prone position which is highly suggestive of aspergilloma.
REFERENCES

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