

## Rubéola congénita: diagnóstico esquecido?

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Figure 1. Fotografia do doente

We report a 7-month-old infant, from Cabo Verde that was admitted because of fever and bacteraemia due to *Streptococcus pneumoniae*. The gestation was not medically accompanied and the immunization status of the mother was unknown. A severe growth retardation, hypotony, severe muscular atrophy, bilateral cataracts and deafness were found. The cardiovascular exam showed a hiperdynamic precordium and a continuous machinery murmur grade IV/VI with radiation to dorsum and significant hepatomegaly. The transthoracic echocardiogram showed a large persistent ductus arteriosus (PDA) and stenosis of the pulmonary artery branches. Cardiac catheterization confirmed PDA with left-to-right shunt and the proximal stenosis of the pulmonary artery branches and also an aberrant right subclavian artery. The patient was submitted to surgical ligation of the PDA and angioplasty of the right branch of the pulmonary artery. In the post-operative period and because of suspected residual stenosis of the left branch pulmonary artery (LBPA), the patient was catheterized and successfully submitted to stenting of LBPA. The patient is currently clinically stable without medication and asymptomatic. These anomalies were compatible with rubella congenital syndrome that was confirmed by serology and PCR.

**Key words:** Congenital rubella syndrome, persistent ductus arteriosus, proximal stenosis pulmonary artery branches

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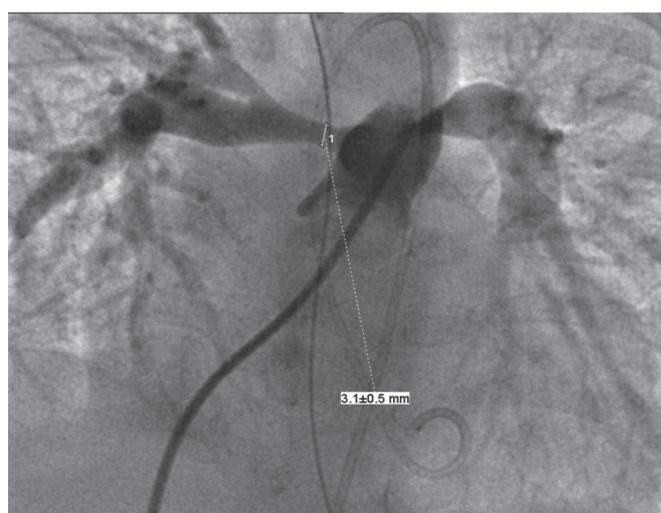
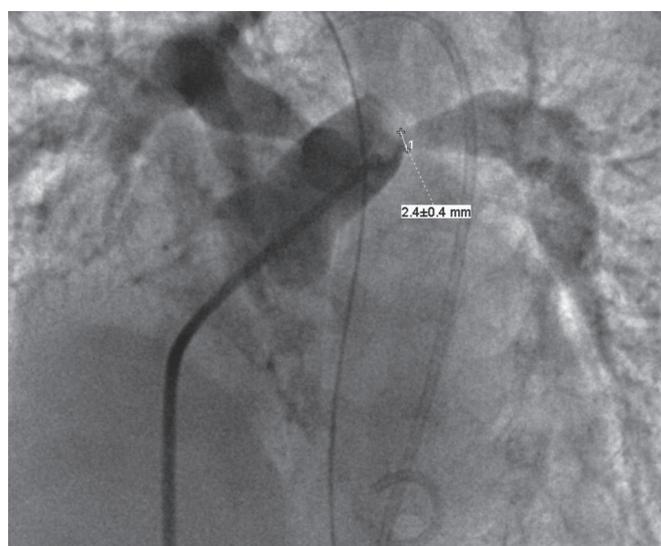


Figure 2. Selective angiography of pulmonary artery (a) LBPA; (b) RBPA

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