



Pulmonary Actinomycosis in Children: A Case Report

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Case report

A 9-year-old girl, admitted for hemoptysis with chronic cough and weight loss in a febrile context. The pulmonary X-ray showed opacity of the right middle lobe and the thoracic CT showed mediastinal adenopathy necrosé center with focal areas of banded atelectasia. In front of this subacute evolution and the radiological images, tuberculosis was evoked and anti bacillary treatment was started however the phtysiological balance remained negative. After a month of well-conducted treatment, the course was marked by apyréxie and a slight weight gain, but at 3 months, the patient returns for a persistent cough

and the appearance of exertion dyspnée. The radio objectivated the persistence of the radiological image and a 2 th thoracic CT an excavated lung disease with medial adenopathy tissue necrotic center. An assessment was requested including negative returned aspergillar serology and bronchoscopy with alveolar broncho lavage with parasitological and bacteriological study. This was in favour of actinomycosis. The child is put on Peni G for 15 days intravenously relaiyée orally by simple amoxicillin for 6 months. Clinical improvement and normalization of chest X-ray is seen with 18-month recoil



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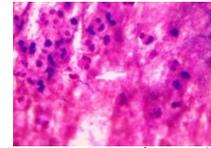
Radio of the month 12/ 18.



Radio of the month 03/ 19.



Central collection with liquid content.



Aspect microscopique des actinomyces.