

# Chilaiditi Syndrome: A Rare Manifestation in Newborn

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## ABSTRACT

1 days newborn presents with abdominal distention, excessive cry, respiratory distress and off fed, abdominal - distended, tenders, tympanic and bowel sound high present were present. Chest X-ray - Gas between below the right colic angle between liver and right diaphragm. Treatment - Conservatives.

### Key words:

Anatomical variants, Chilaiditi sign, right colic angle

## INTRODUCTION

Chilaiditi syndrome is a rare condition characterized by the transposition of a loop of large intestine (usually transverse colon) in between the diaphragm and the liver, visible on plain abdominal X-ray or chest X-ray. This is called chilaiditi sign. This anatomical variant is sometimes mistaken for the more serious condition of having air under the diaphragm (pneumoperitoneum) which is usually an indication of bowel perforation. The exact is not always known, but it may occur in patients with a long and mobile colon, chronic lung disease, a liver problem such as cirrhosis. Absence or laxity of the ligament suspending of the transverse colon Or the faciciform ligament are also thought to contribute to the condition. It also may be associated will relative atrophy of the medial segment of the left lobe of the liver. Chilaiditi sign is named after the Greek radiologist Dimitrios, born in 1883 The incidence is about 0.1% It is an infrequent condition with radiological evidence of symptomatic colonic interposition between liver and diaphragm.<sup>[1]</sup> The diagnosis of this syndrome by erect abdominal and chest

X-ray films is important and it allows the differentiation from pneumoperitoneum, ruptured abdominal viscera, and subphrenic abscess. Chilaiditi syndrome refers only to complications in the presence of Chiliaiditi sign. These includes abdominal pain.<sup>[2]</sup> Torsion of the bowel.<sup>[3]</sup>

10 days old newborn was admitted in Nursery, K.R.H. and G.R. Medical College, Gwalior (M.P.) India with abdominal distention, difficulty in breathing, excessive cry and not

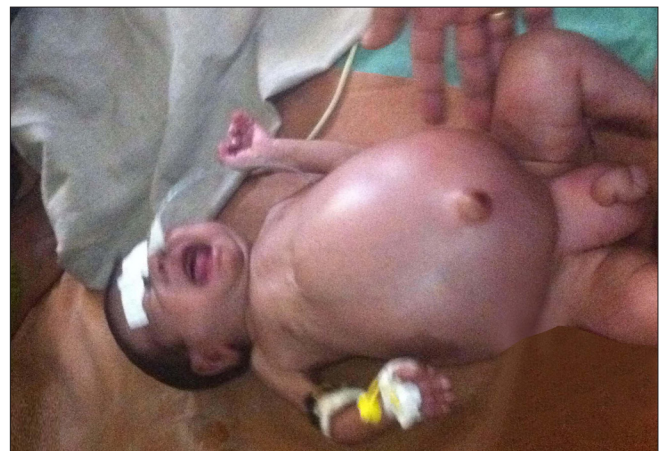


Figure 2: This is a rare disorder

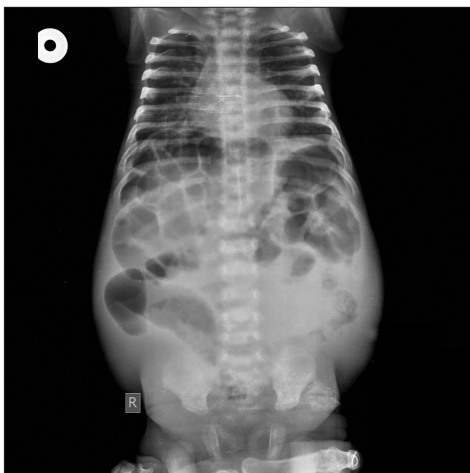


Figure 1: 10 days male baby X-ray shows gas between under the diaphragm and liver

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passing motion since 3 days. On examination - afebrile, abdomen distended without rebound tenderness, temporary and high-pitched bowel sounds were audible over the right abdomen. The chest ray revealed a presence of gas in the right colic angle. Conservative Treatment -Nasogastric tube decompression, oxygen, fluid supplementation, antibiotics, pediatric suppositories. - Baby was recovered from his illness.

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