

Clinical Image

Right Cardiac Bronchus: An Uncommon Incidental Finding^{☆,☆☆}

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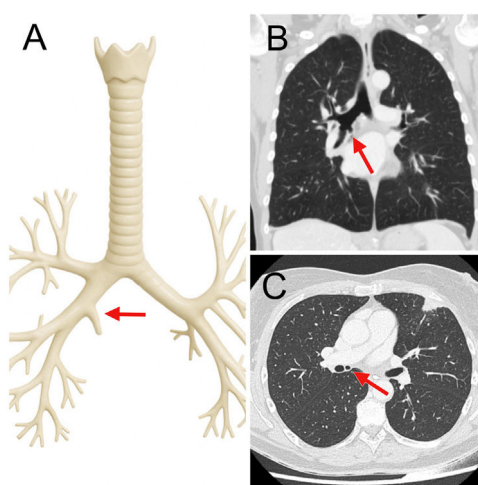


Fig. 1. Right cardiac bronchus: (A) Schematic representation of the tracheobronchial tree. (B) Coronal chest CT showing an accessory bronchus arising from the bronchus intermedius. (C) Axial CT confirming the bronchial trajectory toward the pericardial region.

We present the incidental finding of a right cardiac bronchus (RCB) detected during the diagnostic workup of a 61-year-old woman referred for evaluation of a pulmonary nodule. The patient had no history of recurrent pulmonary infections or chronic respiratory symptoms and was asymptomatic at presentation. Chest computed tomography (CT) confirmed the presence of a pulmonary nodule in the right upper lobe, along with the incidental finding of an accessory bronchus originating from the medial wall of the bronchus intermedius and directed toward the pericardial region (Fig. 1). This finding was consistent with a right cardiac bronchus [1], a rare congenital bronchial anomaly, with an estimated incidence of less than 0.07–0.5% [2,3]. No specific treatment was required for the asymptomatic RCB. Recognition of this anatomical variant is important not only because it may occasionally cause symptoms such as recurrent infections or hemoptysis—although the majority of RCBs remain asymptomatic [3]—but also to prevent diagnostic confusion and iatrogenic injury during bronchoscopic or surgical procedures involving the bronchus intermedius.

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Author contributions

Álvaro Fuentes-Martín: Conceptualization, Clinical Management, Writing – Original Draft, Supervision. María Rosa López Pedreira: Radiological Analysis, Figure Preparation, Writing – Review & Editing. Ángel Cilleruelo Ramos: Literature Review, Writing – Review & Editing.

AI declaration

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Conflicts of interest

The authors state that they have no conflict of interests.

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