



We report a case of a preterm neonate born at 26 weeks' of gestation diagnosed with unilateral diaphragmatic paralysis. This paralysis was a consequence of a phrenic nerve injury due to extravasation of hyperosmolar parenteral nutrition fluid in the upper thorax" Hobson et al (2017).

Abstract:

We report a case of a preterm neonate born at 26 weeks' of gestation diagnosed with unilateral diaphragmatic paralysis. This paralysis was a consequence of a phrenic nerve injury due to extravasation of hyperosmolar parenteral nutrition fluid in the upper thorax. Chest X-rays and ultrasonography confirmed the diagnosis. The neonate was treated with prolonged respiratory support and did not require surgical treatment. This report describes a case of hemidiaphragmatic paralysis as a complication of central venous catheter insertion. In neonates, spontaneous recovery of diaphragmatic paralysis is possible. This study concludes that recovery of extravasation injury-induced phrenic nerve palsy in the context of conservative management is possible.

Full Text

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Reference:

Hobson, C., Dubillot, D., Lardy, H., Sirinelli, D., Saliba, E. and Lopez, E. (2017) A Rare Complication of Central Venous Catheter Extravasation in a Preterm Neonate: Hemidiaphragmatic Paralysis. *AJP Reports*. 7(2), p.e65-e67.

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Neonatal hemidiaphragmatic paralysis following central venous catheter extravasation | 2

