A 31-year-old woman presented with a three-year history of fever, chest pain and productive cough. Chest x-ray revealed opacity in the left lower lobe. Chest CT scan showed a multiloculated cystic lesion. Angiography identified an anomalous arterial connection (Fig. 1) subsequently confirmed by the lobe excision (Fig. 2).

Fig. 1. Left lower intralobar sequestration supplied by an anomalous branch (AB) originating from descending thoracic aorta (ThAO) connected to the pulmonary artery (PA) of the left lower lobe.
Fig. 2. Corrosion cast (silicone rubber injection compounds MICROFIL® CP-101, Flow Tech Inc., Carver, Massachusetts, USA) of the excised left lower lobe shows direct vascular connection between aberrant systemic artery (AB) and pulmonary artery (PA).