

Procedures

POSTPNEUMONECTOMY BRONCHOPLEURAL FISTULA MANAGED BY THE EARLY IPSILATERAL THORACOTOMY

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PURPOSE: Different approaches are used to treat the postpneumonectomy bronchopleural fistula, ranging from the less invasive to the more radical procedures.

The transsternal approach has proved to be the most effective in solving large stump fistulas but not when the bronchus was resected tangent to the trachea.

The authors claim the early carinal resection with the ipsilateral thoracotomy approach in the case of postpneumonectomy bronchopleural fistula.

METHODS: Case series of 5 carinal resection for postpneumonectomy bronchopleural fistula performed within the first 7 days post pneumonectomy from January 2015 to December 2017 in our clinic - three on the right and two on the left side. Three patients initially underwent radical pneumonectomy for NSCLC while the other two patients underwent pneumectomy for a suppurative lung disease.

RESULTS: The bronchoscopic alcohol instillation was prior tried the first 72h-96h without a significant improvement. Surgery was successful in all cases and postoperative recovery was uneventful. Bronchoscopy within 30 days did not show any anastomotic leakage.

CONCLUSIONS: We propose that the early carinal resection could be performed on bronchopeural fistula after pneumonectomy, this could reduce the chances of infection and could be a valid alternative to the later surgical procedures.

CLINICAL IMPLICATIONS: This is a comestic procedure, efficient surgically and on infection.

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