

Clinical Image

Bronchopleural Fistula Management With Amplatzer™ Insertion[☆]

Manejo de fístula broncopleurales mediante colocación del dispositivo Amplatzer[®]

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We report the case of a 66-year-old patient with the following history: right empyema on 2 occasions, atypical resection for invasive adenocarcinoma (1.5 cm) in the left lower lobe, atypical resection for squamous cell carcinoma (2.5 cm) in the right upper lobe (RUL) 4 months later, and decortication by thoracotomy.

Ten months after the last intervention, due to suspected RUL recurrence on suture site, right upper lobectomy with lymphadenectomy was completed.

During the early postoperative period, the patient presented dehiscence of the bronchial stump. Despite reintervention, fiberoptic bronchoscopy revealed persistent bronchopleural fistula (BPF) measuring 8 × 5 mm in the RUL bronchial stump.

In view of the significant pleural thickening, the size of the BPF, and the small residual apical cavity, we decided to perform a thoracotomy.

After examining various therapeutic options, we opted to close the BPF with an Amplatzer[®] Septal-Occluder device, usually employed for foramen ovale closure.^{1,2}

The procedure was performed under sedation in the operating room. The 10 mm Amplatzer[®] Septal-Occluder system guide was introduced via the thoracostomy incision, and placed under simultaneous fiberoptic bronchoscopy visualization, with no complications (Fig. 1A and B).

The patient's progress was satisfactory (Fig. 1C and D), and the thoracostomy could be closed after several months.

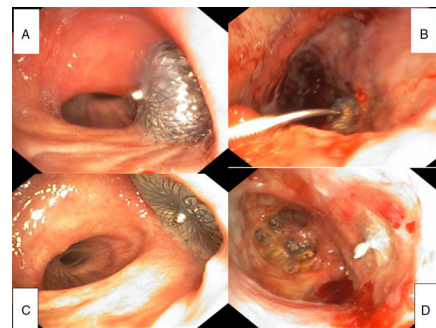


Fig. 1. Figures A and B show the moment when the system was placed: (A) shows the view through the flexible fiberoptic bronchoscopy of the successful Amplatzer[®] placement, after deployment. (B) shows the view through the thoracostomy, at the time of release of the Amplatzer[®] placement system. Figures C and D show the results 3 months after placement: (C) shows the view through the flexible fiberoptic bronchoscopy of the closed fistula in the RUL stump. (D) shows the view through the thoracostomy.

References

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