

SURGICAL TREATMENT OF COMPLICATIONS 55 YEARS AFTER EXTRAPERIOSTEAL LUCITE BALL PLOMBAGE FOR PULMONARY TUBERCULOSIS

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In the 1930-50s, before antimicrobial drugs, collapse therapy was the mainstream of treatment for cavitary pulmonary tuberculosis.

We present an 78-year-old man with a history of

pulmonary tuberculosis treated with plombage in 1962, who presented with axillary pleurocutaneous fistula (Figure 1). The patient was submitted to surgical extraction of 21 lucite balls, pleurocutaneous drainage and thoracoplasty (Figure 2).

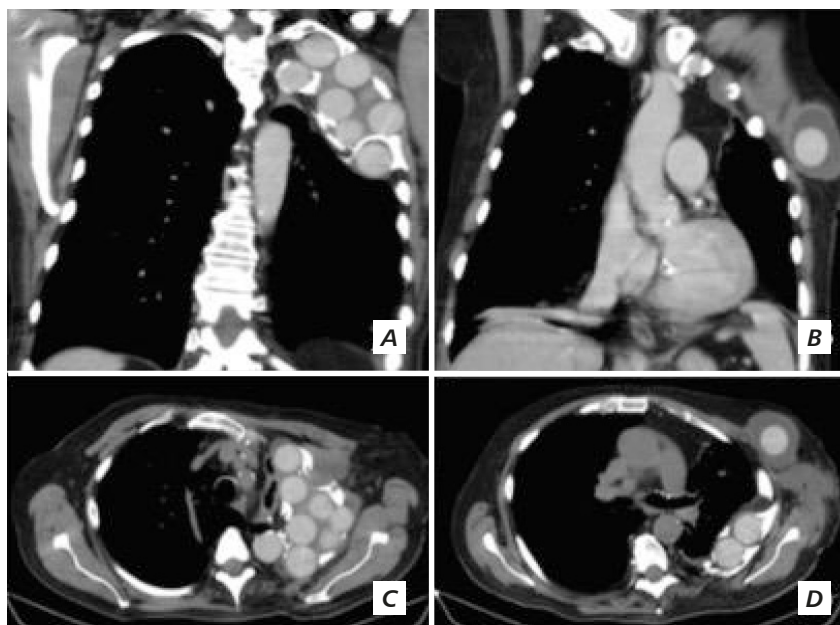


Figure 1

CT-scan, coronal (A and B) and axial (C and D) section, with the apex of the left hemithorax filled with multiple lucite balls, each approximately 2,5cm in diameter, and extrusion of a ball into the axillary fistulous tract.



Figure 2

Surgical extraction of 21 lucite balls, pleurocutaneous drainage and thoracoplasty (7 ribs and the tip of the scapula was remove).