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Surgical management of tuberculous broncholithiasis

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Abstract

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Background: Broncholithiasis is often seen after chronic granulomatosis diseases such as tuberculosis and histoplasmosis and leads to a wide spectrum of signs and symptoms; including hemoptysis which often needs surgical management. The goal of this study is evaluation of surgery in patients with tuberculous broncholithiasis presenting with hemoptysis. **Materials and Methods:** In this study, all patients with tuberculous broncholithiasis whom had been operated on between 1991 and 2005 and their follow-up period was at least 6 months and at most 9 years were included and studied in regard to age, sex, clinical symptoms, diagnostic methods, type of surgical procedure, complications, and mortality rate. **Results:** Overall, 5 patients were studied; ($M/F=2/3$, mean age=31 years), 40% with severe and 60% with mild to moderate and recurrent hemoptysis. Lesion was at the left lung in 80% and at the right lung in 20% of patients. In 60% of patients some degrees of bronchiectasis were seen, in 80% the lesion was visible in bronchoscopy and endoscopic removal of lesion failed in all cases. Sixty percent of patients underwent pulmonary resections and in 40% broncholithectomy was done. In follow-up, patients with pulmonary resection have had no problem till now, but in patients with broncholithectomy due to the late occurrence of bronchiectasis, re-operation and pulmonary resection were unavoidable. No mortality was reported in our patients. **Conclusion:** Regarding the risks of hemoptysis, excellent results of surgery and possible occurrence of late bronchiectasis after broncholithectomy, the results of our study showed that the procedure of choice for these lesions is pulmonary resection distal to lesion and saving as much of parenchyma as possible. Broncholithectomy should be done only in patients in whom pulmonary resection is not technically possible. But because of very low occurrence of this complication, further studies are required in this regard. © 2006 NRITLD, National Research Institute of Tuberculosis and Lung Disease, Iran.

Author keywords

Broncholithiasis; Hemoptysis; Surgery; Tuberculosis

Indexed Keywords

EMTREE medical terms: adult; article; bronchiectasis; broncholithectomy; bronchoscopy; bronchus disease; bronchus stone; clinical article; disease severity; endoscopic surgery; female; follow up; hemoptysis; human; lung injury; lung parenchyma; lung resection; lung surgery; lung tuberculosis; male; recurrent disease; reoperation; stone formation; treatment failure

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