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Title: Bronchoscopic approach in the treatment of postoperative bronchopleural fistula

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Body: Aim: Bronchopleural fistula (BPF) is one of the worst complications of thorasic surgery. Its incidence is between 0,8-15%. Its mortality can reach up to 70%. Most important reason of death is accompanying aspiration pneumonia or ARDS. Method: Consecutive 13 cases that were treated with bronchoscopically due to postoperative bronchopleural fistula were evaluated. Results: Twelve of the patients were male. Mean age was 55,6 (35-71. Fistula was located at the right in 9 cases while located on the left in 4 of them. Resection was applied to seven of the cases for squamous cell carcinoma, one of the cases for adenocarcinoma, one of the cases for aspergilloma and one of the cases for tuberculosis sequela. Silicon Y stent was placed in eight, metallic conic stent was placed in two and straight silicon stent was placed in one of the cases. In one of the cases in which empyema surgery was applied, lingula segments were closed by spigots. Small size fistule was closed by coagulation. Three of the cases were died 6, 35 and 94 days after the stent insertion. Procedures were successful in eight, partly successful in one and not successful in four of the cases. Conclusion: If surgical reconstructive repair could not be done in postoperative bronchopleural fistula, mortality is high. In these cases, bronchoscopic treatment is the only treatment option. Cure can be optained in some of the cases in which infection control is maintained. Survival is significantly increased in cases with wide fistulas after stent insertion.