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Title: Complex surgical solution for thoracic wall necrotizing fasciitis

Cornel 18299 Petreanu ADI_PETREANU@YAHOO.COM¹, Leonard 18300 Militaru LEONARDMILITARU@YAHOO.COM¹, Boris Constantin 18301 Coman BORIS_COMAN@YAHOO.COM MD¹, Elisabeta 18302 Balaita ELISABETABALAITA@YAHOO.COM² and Nicolae 18303 Galie NICOLAE_GALIE@YAHOO.COM MD¹. ¹ Thoracic Surgery, National Institute of Pneumology "Marius Nasta", Bucharest, Romania and ² Anesthesiology and Intensive Care, National Institute of Pneumology "Marius Nasta", Bucharest, Romania .

Body: Necrotizing fasciitis of thoracic wall is a severe disease which is associated with a high rate of mortality, especially for immunosuppressed patients. Multiple drainage incisions, excision of necrotic tissues and appropriate antibiotherapy represent the right therapeutic solution. The authors present the case of 43 years old male, diagnosed with left empyema secondary to pulmonary tuberculosis. A left tube thoracotomy was performed for drainage, followed by surgical emphysema (secondary to increase air leaks) and necrotizing fasciitis surrounding the tube thoracotomy, which has extended to left hypochondrium. First, multiple drainage incisions were performed, with excision of necrotic tissues and antibiotherapy.

Azorin's procedure was performed after, closing the main left bronchus and the air leaks were stopped.

After 18 days, the thoracic wall wounds were healed, allowing left pneumonectomy to be performed. Sputum exam became negative soon after closing the left main bronchus. Closing the left main bronchus using the Azorin's procedure stopped the air leaks, which led to decreased of microbial contamination of the thoracic wall wounds and good out-come.