A Cast of the Left Bronchial Tree

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A 16-year-old boy was admitted for pacemaker implantation because of symptomatic sinus bradycardia. He was born with a complex univentricular heart for which a Fontan circuit was created [1]. A few days after pacemaker implantation, he progressively required more oxygen and started coughing up rubbery-like secretions. Chest radiograph (Fig. 1a) showed an obstructive atelectasis of the left lung; bronchoscopy visualized a plug. A cast resembling the left bronchial tree was removed (Fig. 1b). Pathological assessment confirmed an acellular fibrin cast, compatible with plastic bronchitis which is a rare complication in Fontan patients [2]. Venous pressure overload, as typical for a Fontan circulation, predisposing to a lymphatic leak into the airway is the underlying mechanism [3]. Indeed, lymphography confirmed paratracheal leakage for which Lipiodol® was successfully injected [4].

Fig. 1  a Chest radiograph showing atelectasis of the left lung accompanied by mediastinal shift to the left. b Bronchial cast of the left lung that was removed via bronchoscopy. LMB left main bronchus, LB left bronchus
Compliance with Ethical Standards

Conflict of interest None.

References


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