

THE ROLE OF VIDEOTHORACOSCOPY IN COMPLEX TREATMENT OF PATIENTS WITH TUBERCULOUS PLEURISY

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Abstract

The rate of tuberculous pleurisy in overall tuberculosis structure is within 2,2–31 %. In 70 % of all tuberculous effusion cases a tuberculous pleurisy is a separate nosological entity without any specific lesions in other organs and structures of thoracic cavity. Protracted course of tuberculous pleurisy, slow recovery, a formation of numerous pleural adhesions, pleural thickening, a risk of development of pleural cirrhosis and empyema suggest more extensive use of videothoracoscopy in management of this group of patients.

There was analyzed an efficiency of complex treatment of 136 patients with tuberculous pleurisy. Patients were divided into two equal groups receiving identical standardized antimycobacterial therapy. Overall effectiveness of treatment in videothoracoscopy group was 2 times higher than in group of conventional management using the punctures and drainages of pleural cavity. Average term of hospital staying in the first group was 2,7 times shorter, the term of exudation was 4,5 times shorter and the volume of an exudation was 6,8 times less than in second group. Monitoring of outcomes in 6 months demonstrated no relapses in both groups along with improvement of the pulmonary function and decrease of radiologically defined residual lesions in the first group. There were made the recommendations for the use of pleural cavity treatment methods.

Key words: tuberculous pleurisy, videothoracoscopy, effectiveness of treatment.

Ukr. Pulmonol. J. 2013; 2: 46–50.

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