

EFFICIENCY OF PARIETAL PLEURECTOMY WITH DECORTICATION OF THE LUNG AND RESECTION OF THE AFFECTED PARENCHYMA IN PATIENTS WITH PULMONARY DISEASES

M. S. Opanasenko, S. M. Shalahai, O. E. Kshanovsky, L. I. Levanda

Abstract

The aim - to evaluate the effectiveness of the "classic" pleurectomy with decortication of the lung and pleurectomy with decortication and resection of the affected parenchyma.

Materials and methods. We analyzed 82 cases of chronic different etiology pleural effusion, treated using the "classic" pleurectomy with decortication of the lung by means of wide thoracotomy (group I — 53 (64,6 %) patients) and pleurectomy with decortication and resection of the affected lung parenchyma (group II — 29 (35,4 %) patients). The majority of patients had tuberculosis of pleura — 67 (81,7 %); non-specific pleurisy was diagnosed in 15 (18,3 %) patients.

Results. In 5 (9,4 %) group I patients the surgery was complemented by corrective 3-rib extra-intrapleural thoracoplasty, in 4 (7,5 %) — by diaphragmoplasty. Closure of bronchial fistula was performed in 3 (5,7 %) patients.

In group II limited resection of the lung combined with pleurectomy and decortication of the lung was performed in 9 (31,0 %) patients with chronic nonspecific pleural empyema without bronchial fistula; 7 (24,1 %) patients with chronic tuberculous pleurisy; 6 (20,7 %) patients with chronic tuberculous pleural empyema and bronchial fistula; and 1 (3,4 %) patient with chronic nonspecific pleurisy.

In 3 (10,3 %) cases of group II polysegmental lung resection was performed for tuberculoma, 2 (6,9 %) cases — lower pleurolobectomy for hypoplasia of the lower lobe of the right lung and 1 (3,4 %) — for chronic abscess of the lower lobe of the left lung.

Conclusions. The use of "classic" pleurectomy with decortication of the lung is indicated at any time point when less traumatic intervention is not technically possible to perform. If any doubts, the surgery should be started with the revision of pleural cavity using videothoracoscopy to determine the possibility of conversion into a wide lateral thoracotomy. Pleurectomy with decortication is indicated for resection of affected parenchyma and huge adhesions in fibro-cavernous tuberculosis in order to prevent the formation of residual pleural cavity.

Key words: pleurectomy with decortication, empyema, chronic pleurisy.

Ukr. Pulmonol. J. 2017; 1: 20–24.

Mykola S. Opanasenko

National institute of phthisiology and pulmonology

named after F. G. Yanovsky NAMS of Ukraine

Head of thoracic surgery and invasive

methods of diagnosing department

Doctor of medicine, professor

10, M. Amosova str., 03680, Kyiv

Tel. 380672718511, opanasenko@ifp.kiev.ua