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Effect of Single Versus Multiple Hydatid Cysts in Lung to Morbidity

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Objectives: In our study, our aim was to observe the effect of single versus multiple hydatid cysts in lung to morbidity after surgical treatment.

Methods: Fifty-six cases with lung hydatid cyst have been operated in Department of Thoracic Surgery, Trakya University School of Medicine between January 2000-December 2009. Cases were evaluated through age, gender, symptomatology, prevalence of disease, added organ with disease, operation details, postoperative complications and prognosis. For statistical percentages and distributions T-test, Crosstabs, Chi-square test, Oneway Anova, NPar tests were used.

Results: Patients were between 7 and 82 ages. Mean age was 38.77. Cases were 27 (48.2%) men and 29 (51.8%) women. We were performed 65 surgery procedures for 56 cases at different hospitalizations. Sixty-four operations were performed with general anesthesia and one with local anesthesia. In these patients, thoracotomy was performed in 62 patients, sternotomy was performed in two patients and percutane drainage was performed in one patient. In patients with pulmonary cysts, cystotomy with capitonage (n=51), wedge resection (n=5), cyst resection (n=3), enucleation and percutane drainage (n=1) were performed. Mean hospitalisation period was 8.57 days (3-25 days). Eight cases occurred different complications: Prolonged air leakage had been seen (n=2), pneumonia after 20 days and hydropneumothorax after four months (n=1), hydropneumothorax (n=1), prolonged air leakage and residual cyst (n=1), prolonged air lackage and pneumothorax (n=1), three times pneumothorax at different times (n=1) and prolonged biliary leakage (n=1) were seen. One of our cases, a 82 year old woman died, because of multi organ failure in the first postoperative day in intensive care unit. Our mortality rate was 1.78%. In 4 (7.1%) cases recurrent disease have been seen. As a result, in our cases, the number of lung hydatid cysts does not statistically significant on postoperative complication rate (p=0.0055).

Conclusion: In lung hydatid disease, actual treatment is surgery and even in single or multiple cysts surgery should be applied, but the number of lung hydatid cysts does not effect on potoperative complication rate.

Keywords: Cyst hydatid, lung, morbidity