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Iatrogenic Pneumothorax: ERCP (Endoscopic Retrograd Cholangiopancreatography)

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Introduction: Pneumothorax can be classified as spontaneous (primary and secondary), traumatic and iatrogenic. Iatrogenic pneumothorax is a pneumothorax caused by lung laceration during diagnosis and treatment procedures (subclavian vein catheterization, transthoracic biopsy, thoracentesis, bronchoscopy (transbronchial biopsy), positive pressure ventilation, tracheostomy, intercostal blockage). Besides these procedures, pneumothorax may develop during endoscopic retrograd cholangiopancreatography (ERCP).

Case Presentation: 88-year old female patient developed shortness of breath and chest pain during ERCP. Pneumothorax had been diagnosed with chest radiography and performed tube thoracostomy. The thoracic tomography existed after tube thoracostomy revealed mediastinal emphysema. The patient was taken to the operation with acute abdomen and the laceration on the lateral side of the duodenum was repaired. No complications were observed during the follow-up of the patient.

Conclusion: Pneumoperitoneum, pneumomediastinum, pneumothorax and subcutaneous emphysema due to duodenal perforation during ERCP procedure are very serious and fatal complications that require urgently intervention.

Keywords: Iatrogenic, pneumothorax, endoscopy