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Idiopathic Chylothorax: Case Report

Arzu Deniz Aksan, Mesut Bayraktaroğlu, Zekiye Nur Aşık, Birsen Pınar Yıldız

University of Health Science, Yedikule Chest Disease and Thoracic Surgery Training and Research Hospital, İstanbul, Turkey

Introduction: Chylothorax is defined by the presence of chyle in the pleura. It is a potentially life threatening disease. Depleted function of respiratory, nutritional, and immunological status is important for the clinical course.

Case Presentation: A 39 years-old nonsmoker woman was admitted for progressive dyspnea last 2 months. Pleural effusion discovered by a chest radiography. Patient presented with the pain at the left side of her chest started 2 months prior to admission. Thoracentesis showed a milky appearing fluid. Pleural fluid biochemical analysis: LDH:152, ADA:3.7, total protein:3.7, albumin:3.14, total cholesterol: 101, triglycerides1696, TK/TG<1; compatible with the chylothorax. There was no history of trauma or surgical procedure. 28F chest tube inserted into the left pleural space drained 1000 ml exudative fluid daily. Conservative treatment approaches including medium-chain triglyceride (MCT) diet has been started immediately. Somatostatin infusions has been applied in 10th day with 250 mcg/hr intravenously. Thoracic computed tomograpy (CT), CT in abdomen, doppler ultrasonography for upper/lower venous systems were detected no abnormality, None of the etiologic factor has been detected by clinical and laboratory evaluation. Lymphoscintigraphy performed to identify the presence and the site of leak. Surgical ligation of the thoracic duct has been performed for the treatment in 14th day. Patient has been followed in 3 months without any recurrence.

Conclusion: Idiopathic chylothorax is a life threatening rare seen disease in adults. Optimal treatment strategies are remains controversial and it may be divided as a conservative or surgical. Nutritional support of the patient with MCT or TPN are recommended. Chest tube insertion together with the nutritional support with MCT has been preferred in our patient as a first. Somatostation has been used additionally started in 10th day. Due to the conservative treatment has been failed, surgical ligation of the thoracic duct performed for the treatment. Diagnosis and treatment of idiopathic chylothorax would be difficult and long standing procedure such as our patient. This case highlights the difficult and long standing management of persisted idiopathic chylothorax.

Keywords: Chylothorax, idiopathic, pleural effusion