

DOI: 10.5152/TurkThoracJ.2019.345

[Abstract:0539] PP-231 [Accepted: Poster Presentation] [Clinical Problems - Other]

A Rare Cause of Chronic Cough: Broncholithiasis

Gülfem Yıldırım¹, Baykal Tülek²

¹Department of Chest Diases, Karatay University Özel Medicana Hospital, Konya, Turkey

²Department of Chest Diases, Selçuk University School of Medicine, Konya, Turkey

A 77-year-old female patient was admitted to our clinic with chronic cough for two years. The patient was diagnosed with COPD and was on inhaler therapy. In addition, sputum, chest pain, hemoptysis, fever did not describe. Her physical examination revealed wheezing and bilateral brochospasm. Chest x-ray showed increased opacity secondary to calcification in bilateral hilar areas. Thorax CT was performed and multiple calcific lymph nodes were detected in the mediastinum. Secondary obstruction was also present in the right main bronchus. Bronchoscopy was planned. After coughing in clinical follow-up, the patient expeled a hard, gray stone of approximately 15 mm in size. After that the patient was accepted as a case of broncholithiasis as a result of clinical and radiologic findings. Hemoptysis did not occur after stone expectoration. Calcified material was not observed in the right main bronchus in the control thorax CT of the patient. The patient's complaints of cough gradually decreased. Since our country is an endemic region for tuberculosis, we think that calcified lymph nodes secondary to tuberculosis in our case have settled into the bronchus and caused cough. While presenting our case, we wanted to emphasize that broncholithiasis should be remembered as a rare cause of coughing which does not improve despite symptomatic treatment.

Keywords: Broncholithiasis, cough, tuberculosis