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BRONCHOSCOPIC MANAGEMENT OF ENDOBRONCHIAL CARCINOID IN A VENTILATED PATIENT.

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Background: Endobronchial lesions are commonly managed by intervention bronchoscopy procedures. However, treatment of these lesions in a ventilated patient is difficult. We present a case of bronchoscope treatment of endobronchial carcinoid that has weaning difficulty secondary to obstructed bronchus.

Case: A 42 year male with right sided endobronchial carcinoid was ventilated because of respiratory failure. Weaning difficulty was observed secondary to obstructed lung for 3 weeks. Hence, debulking of carcinoid was planned. Bronchoscopic debulking was done with flexible bronchoscope via tracheostomy on BIPAP ventilation mode with Argon plasma coagulation. Patient has a right sided pneumothorax which was treated with inter-costal drain. Patency of the right main bronchus was achieved and the patient was weaned off the ventilator on 4th day.

Conclusion:Interventional procedures of bronchoscopy in ventilated patient are difficult because ventilation is compromised and time duration for the procedure is more as compared to diagnostic bronchoscopy. Bronchoscopic debulking can be done in ventilated patient to improve lung function and facilitate weaning difficulty.

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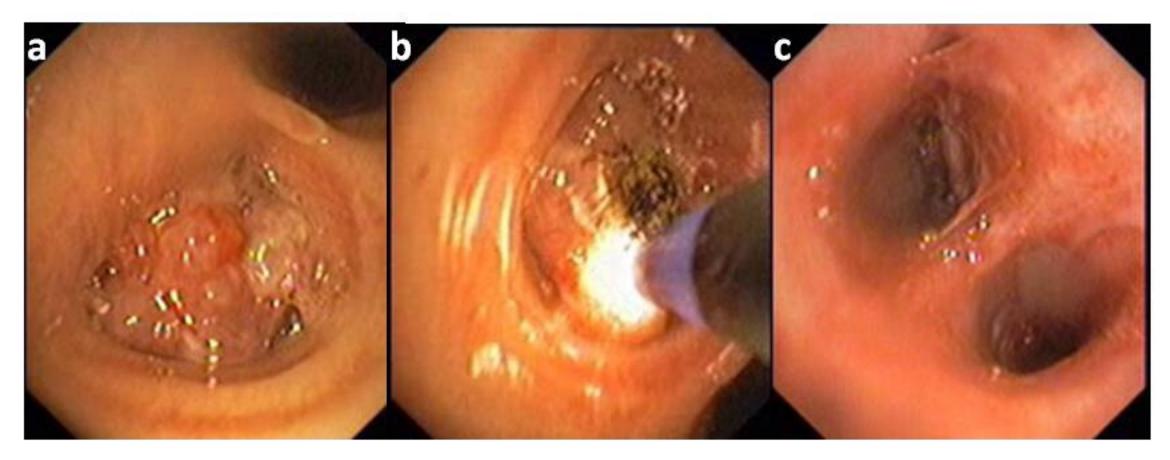


Figure 1 : Endobronchial lesion treatment a) Pre procedure b) debulking, c) post procedure