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Background Bronchial anthracofibrosis is mainly occurred in Asian countries, but there has not been reported in China. So We will study the clinical characteristics of bronchial anthracofibrosis in southwest China.

Methods The clinical, radiological, bronchoscopic characteristics and comorbidities of 92 cases of bronchial anthracofibrosis were retrospective analyzed.

Results The bronchial anthracofibrosis mainly occurred in female farmers who were older than 60 years old, but also occurred in workers who had exposure to mixed mineral dusts. The main clinical symptoms are cough, dyspnea, hemoptysis. The bronchoscopy can found some specific changes, such as bronchial mucosa pigmentation, visible longitudinal mucosal folds, hypertrophic scars, and other tumor-like changes in the corresponding lobe and segmental bronchi with narrow, twisting and occlusion. Bronchoscopic findings in patients with bronchial anthracofibrosis revealed bilateral bronchial involvement in 51.1% of the total patients. Our study documented right upper lobe involvement in 52 patients (56.5%), left upper lobe in 49 (53.3%) and right middle lobe in 46 (50.0%). In the 92 cases, 32 cases (34.8%) patients with chronic obstructive pulmonary disease, 23 cases (25.0%) patients with obstructive pneumonia, 20 cases (21.7%) of pulmonary tuberculosis and (or) endobronchial tuberculosis, 7 cases (7.6%) combined with lung cancer.

Conclusions The bronchial anthracofibrosis have no specific clinical features and often is misdiagnosed, so we need to strengthen awareness of the disease. The disease not only occurred in farmers but also occurred in workers who had exposure to mixed mineral dusts. Bronchoscopy is an important method to diagnose this disease. The disease mainly occurred in right upper lobe and right middle lobe, and was often associated with chronic obstructive pulmonary disease, obstructive pneumonia, tuberculosis and lung cancer.