

“Trapped” Lung from Calcified Fibrothorax

Pulmão “Encarcerado” por um Fibrotórax Calcificado



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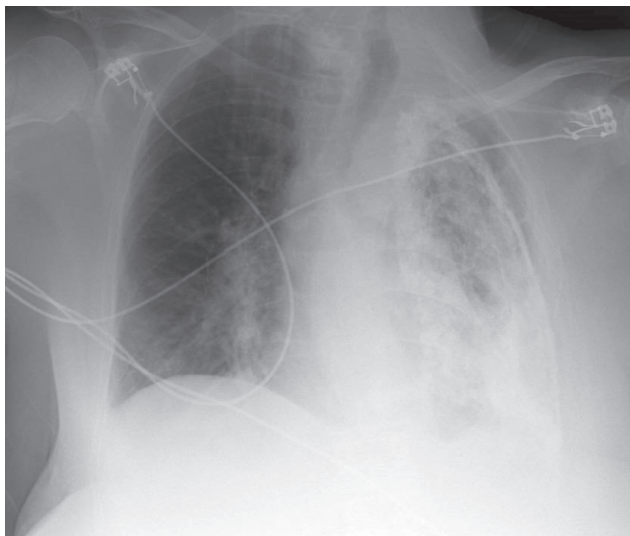


Figure 1 – Chest radiograph shows nearly complete left pleural calcification and marked lung volume reduction

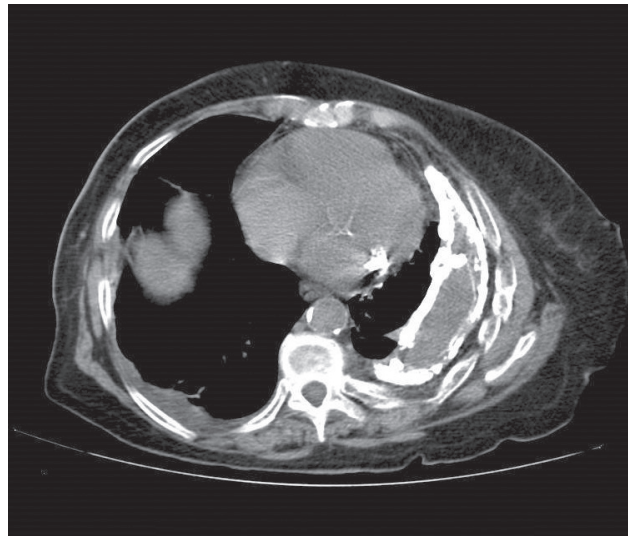


Figure 2 – Computerized tomography with extensive calcification of left lung fibrothorax

A 91-year-old woman presented with a 2-week history of dyspnea and productive cough. She was autonomous regarding the activities of daily living and had a medical history of type 2 diabetes, hypertension and suspected tuberculosis in her twenties. The arterial blood gas test revealed severe hypercapnia with acidemia. The chest radiograph (Fig. 1) showed a nearly complete left pleural calcification associated with a marked lung volume reduction and computerized tomography (Fig. 2) confirmed a calcified fibrothorax.¹ A thick ‘peel’ formed on both pleural surfaces, preventing complete lung expansion, and thus limiting functional reserve.² These exuberant findings are unusual but strongly suggestive of late sequelae from untreated pleural tuberculosis. A respiratory infection led to multifactorial respiratory failure associated with the pleural disease, age-related chest wall weakness and pulmonary congestion. The patient was successfully managed with conservative treatment. These findings portray the clinical and physiological implications of a trapped lung.

AUTHOR CONTRIBUTIONS

MB: Conception and coordination of the work; draft of the manuscript.

MT, RM: Critical review.

PROTECTION OF HUMANS AND ANIMALS

The authors declare that the procedures were followed according to the regulations established by the Clinical Research and Ethics Committee and to the Helsinki Declaration of the World Medical Association updated in 2013.

DATA CONFIDENTIALITY

The authors declare having followed the protocols in use at their working center regarding patients’ data publication.

PATIENT CONSENT

Obtained.

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COMPETING INTERESTS

The authors have declared that no competing interests exist.

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