



Surgical management of pulmonary aspergilloma – A multidisciplinary approach to management

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Abstract

Background: A pulmonary aspergillomas is a mass of saprophytic aspergillosis that usually forms in a pre-existing cavity within the lung parenchyma. It is usually detected radiologically or via serum antigens. Complications of pulmonary aspergillomas include respiratory failure and massive haemoptysis; the latter of which can often be fatal. Medical management alone has yet proved ineffective, so surgery is currently a mainstay of treatment. Morbidity and mortality related to earlier surgical interventions were high but recent techniques have improved upon this greatly. Cavernostomy with a lattisimus dorsi flap is one such method. **Case:** A 59-year-old lady with a background of an old tuberculosis infection- 36 years prior- presented with recurrent episodes of haemoptysis. Computed tomography (CT) revealed a persistent left upper lobe cavitation containing a pulmonary aspergilloma. Surgical intervention was delayed due to the separate developments of a cerebral abscess and of appendicitis. Eventually, a combined cardiothoracic and plastic operation led to a cavernostomy formation with removal of the aspergilloma. The cavity was then lavaged with antifungal medication and filled with a lattismus dorsi muscle flap. Post-operatively, she was treated with a prolonged course of voriconazole.

Conclusion: Surgical management can offer definitive treatment of pulmonary aspergilloma.

Biography

Shane Ahern is a graduate from University College Cork. It is the university in which he is completing his Masters in Surgical Science. He began his surgical training in Cork University Hospital. Since then he moved to paediatric Orthopaedic and cardiothoracic surgery.



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