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Title: Over 2000 cases of thoracic trauma – 10 years experience of a single clinical centre

Prof. Dr Alexandru 16610 Nicodin acnicodin@gmail.com MD ¹, Dr. Ovidiu 16611 Burlacu burlacuvidiu@gmail.com MD ¹, Dr. Voicu 16612 Voiculescu voicu.voiculescu@gmail.com MD ¹, Dr. Gabriel 16613 Cozma mgcozma@yahoo.com MD ¹ and Dr. Calin 16614 Tunea calin.tunea@gmail.com MD ¹. ¹ Thoracic Surgery, Timisoara Municipal Hospital, Timisoara, Timis, Romania, 300079 .

Body: Objectives: We present the experience of our clinic in the diagnosis and treatment of thoracic trauma, there being some controversial issues in this field in medical literature. Material and Methods: This study encompasses 2156 cases admitted over a period of 10 years (2002 – 2011). Patients were analyzed in terms of sex, age, causative mechanism, as well as thoracic and extrathoracic lesions. Methods of diagnosis and surgical treatment, complications that occur, duration of hospital stay, and evolution under treatment are presented. Results: Hospitalization due to thoracic trauma represents on an average 21% of all admissions. Cases of polytrauma (35%) were managed by a multidisciplinary team. Regarding diagnostic tools, computerized tomography was used in 35% of the cases and bronchoscopy in 6%. Fine needle aspiration biopsy was used for the differential diagnosis of pulmonary contusions in 1.4% of the cases. The most frequent thoracic lesions were rib fractures, pleural effusions, and pulmonary contusions. Pleurotomy was most frequently used (47%) while thoracotomy was used in 8% of the cases operated upon. Complications affected 18% of the cases. 76% of patients that required over 3 weeks of hospitalization presented with extensive pulmonary contusion. Unfavorable results were seen in 4% of the patients while 2.6% of the patients died. Conclusions: Thoracic trauma represents a difficult challenge, often with a surprising evolution. The diagnosis and application of the best surgical management, often with the help of a multidisciplinary team, is paramount. Associated pulmonary contusion prolongs hospital stay.