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Title: Empyema necessitatis: A rare entity

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Body: Empyema necessitatis is a rare complication of empyema in which the pleural infection spreads outside of the pleural space to involve the soft tissues of the chest wall. The most common cause of empyema necessitatis is mycobacterial infection, streptococus and staphylococcus infection. We present our experience in treating empyema necessitatis. MATERIAL & METHOD: Out of 350 patients treated for postpneumonic empyema, 7 presented with empyema necessitatis. There were male ranging in age from 45 to 67 years and all but one were immunocompromized patients, either HIV-positive or drug addicted. The diagnosis was put during clinical examination and was confirmed by CT scan and paracentesis. All patients were primary drained and then were led to the operating room and submitted to mini-thoracotomy, drainage and decortication by using a videothoracoscope. RESULTS: There was no mortality, while one of patients due to uncontrolled sepsis at the time of presentation needed a prolonged stay at the ICU. The hospitalization ranged from 10 to 31 days and there was no recurrence in a follow up of 6 months. CONCLUSION: Empyema necessitatis should be suspected in any patient with pulmonary symptoms presenting with a chest wall mass as well as in patients with known skin and soft tissue infections of the chest wall. Imaging studies and sampling of the lesions by aspiration or biopsy are the mainstays of diagnosis. Appropriate antimicrobial therapy and surgical drainage of the empyema are the mainstays to a successful outcome in cases of empyema necessitatis.