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Point of care lung ultrasound diagnosis of concomitant lung abscess and pleural empyema due to a bronchopleural fistula

Diagnóstico ecográfico pulmonar de absceso pumonar y empiema pleural concomitantes debido a una fístula broncopleural

Adrien Rivory*, **Gary Duclos**, **Laurent Zieleskiewicz**

Department of Anesthesiology and Intensive Care, AP-HM, Nord Hospital, Marseille, France

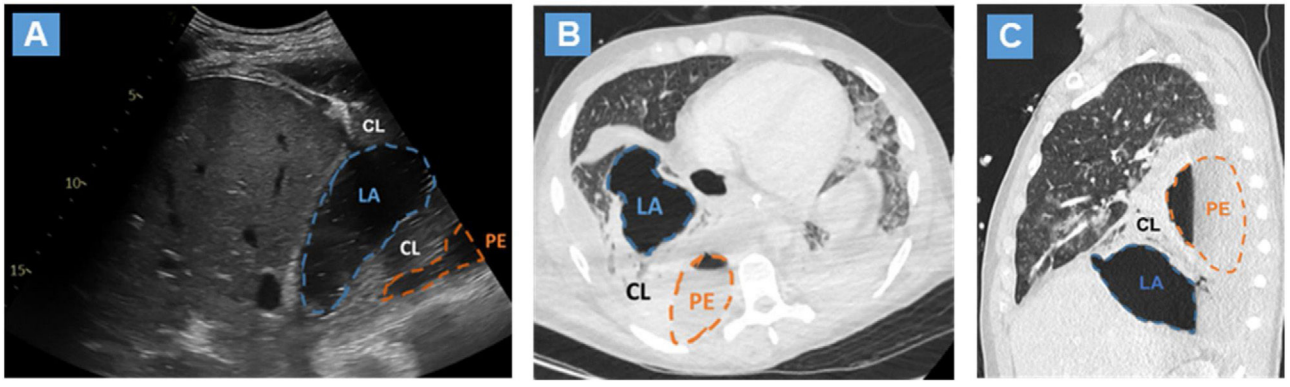

Figure 1

A 41-year-old male patient was admitted following a hypoxic cardiac arrest with a tooth aspiration in the right lower lobe, which was removed using a rigid bronchoscope. Despite appropriate antibiotic treatment for pneumonia, the patient developed a sepsis. Point-of-care ultrasound (POCUS) revealed a lung abscess (LA) associated to a pleural empyema (PE). On parasagittal section (Fig. 1 A), lung ultrasound showed a right lower lobe abscess appearing as a rounded anechoic image above the diaphragm, with suspended microbubbles (air content). Condensed lung parenchyma (CL) was observed around the structure. Behind it was another collection with smooth margins, a lenticular wall attached to the pleura, which appeared

* Corresponding author.
E-mail address: Adrien.rivory@ap-hm.fr (A. Rivory).

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to be pleural empyema. The association of a LA with PE suggested the existence of bronchopleural fistula. A subsequent chest computed tomography scan confirmed this diagnosis, with transverse (B) and parasagittal (C) sections (Fig. 1).

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Conflicts of interest

LZ received fees from GE healthcare for ultrasound teaching to GEH customers. AR and GD declare that they have no competing interest.