



IMAGES IN INTENSIVE MEDICINE

Lung ultrasound: Lung abscess secondary to necrotizing pneumonia

Ecografía pulmonar: absceso pulmonar secundario a neumonía necrotizante

L.J. Pérez Bazaga*, C. Ávila Sansegundo, M.Á. Santiago Triviño

Unidad de Medicina Intensiva del Hospital Universitario de Badajoz, Badajoz, Spain

Available online 18 November 2023

A 52-year-old patient with a history of acquired immunodeficiency syndrome (AIDS) was admitted to our Unit due to *Streptococcus pneumoniae* community-acquired pneumonia. The chest radiographs evidenced right basal infiltration,

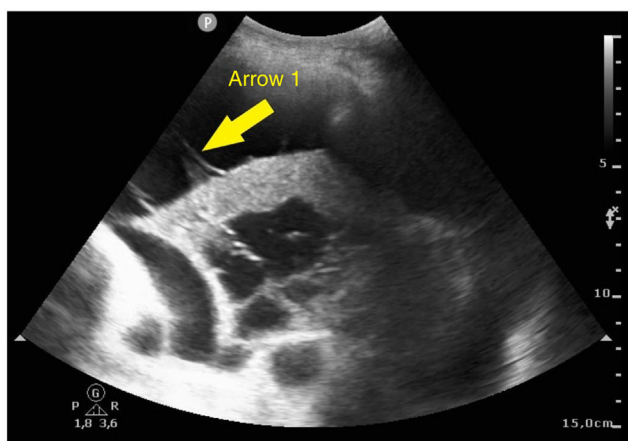


Figure 1

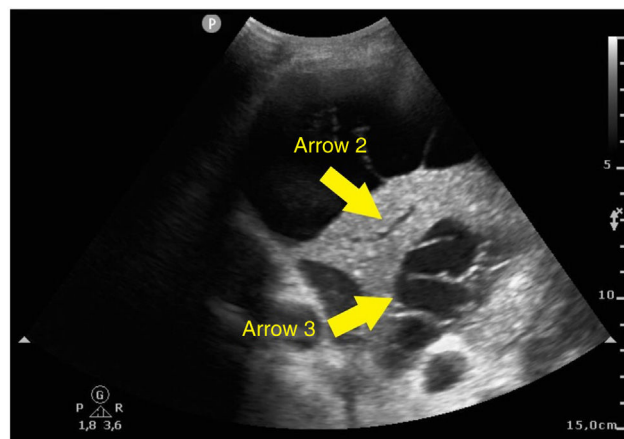


Figure 2

and the computed tomography (CT) study showed necrotizing pneumonia with a probable incipient lung abscess. The clinical course was poor, with hypoxemia refractory to cycles in prone decubitus. Pulmonary ultrasound revealed pleural effusion containing hyperechogenic fibrous tracts (plankton sign) (Fig. 1, arrow 1), right basal infiltration with hyperechogenic parenchyma secondary to hepatization, air bronchogram (Fig. 2, arrow 2), and well delimited internal hypoechoic trabeculate zones consistent with necrotizing pneumonia and lung abscess (Fig. 2, arrow 3).

DOI of original article: <https://doi.org/10.1016/j.medin.2023.10.014>

* Corresponding author.

E-mail address: luisjavier.perez@salud-juntaex.es
(L.J. Pérez Bazaga).

<https://doi.org/10.1016/j.medic.2023.11.007>

2173-5727/© 2023 Elsevier España, S.L.U. and SEMICYUC. All rights reserved.

Conflicts of interest

The authors, L. Javier Pérez-Bazaga, Carlos Ávila-Sansegundo and María Ángeles Santiago-Triviño declare that they have no conflicts of interest.

Funding

The authors have received no funding for the present study.