



IMAGES IN INTENSIVE MEDICINE

Giant lung abscess complicating pneumonia managed with veno venous extracorporeal membrane oxygenation



Neumonía complicada con absceso pulmonar gigante, manejado con oxigenación con membrana extracorpórea veno-venosa

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A 63-year-old woman arrived to the Emergency department with cyanosis, severe hypoxia and septic shock. We decided to orotracheal intubation and ICU admission. In the first hours in-ICU, she evolved with worsening of shock, severe refractory hypoxemia, and hypercapnia, without response to prone position, for which she decided to implement support with V-V ECMO, and allow-us to perform a lung CT Scan (Fig. 1) and a bronchoalveolar lavage. Among findings a voluminous abscess communicating with the distal airway indicative of bronchopleural fistula (Fig. 2). In the respiratory cultures, were isolated: Haemophilus influenzae, and Parvomonas micra. Based on these results, we optimized antibiotic therapy. In the following days, evolved with notable improvement, decrease in Noradrenaline until withdrawal. Progressive reduce V-V ECMO parameters until weaning at 12th day. A tracheostomy was performed to wean her from mechanical ventilation. The patient was finally discharged to ward.

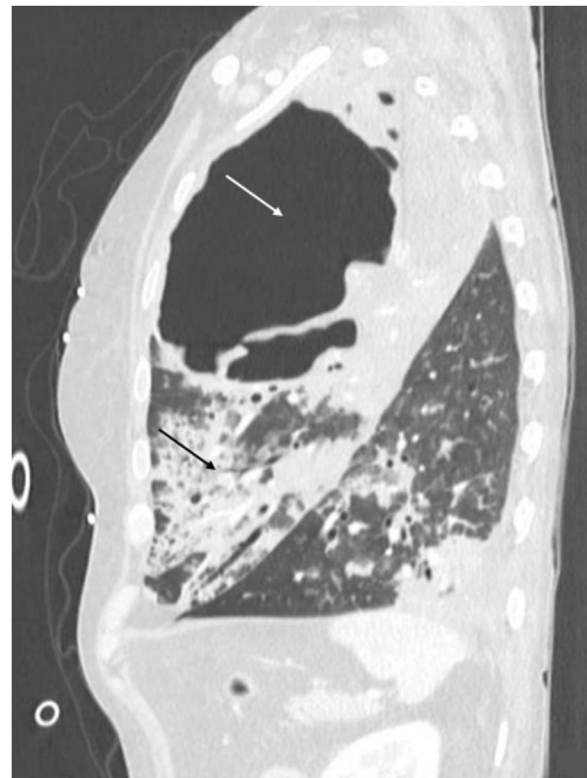


Figure 1

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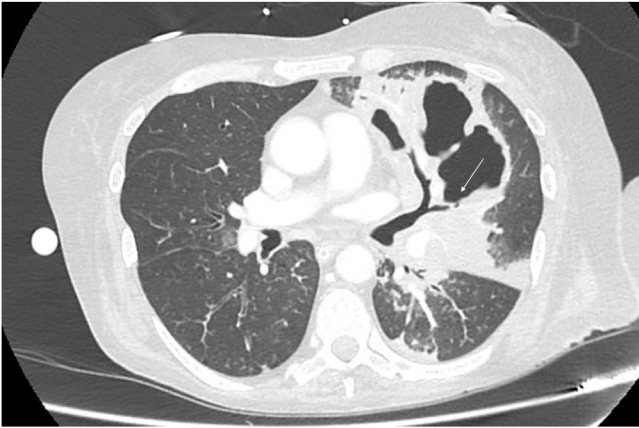


Figure 2

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Conflict of interest

The above-mentioned authors declare that they don't have any disclosure or conflict of interest related with topic of the manuscript.