

The use of fibrin adhesive in relapsing spontaneous pneumothorax.

[German]

Authors: Kaiser D.

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Abstract:

The article reports on the results of surgical thoracoscopy using the mediastinoscope in relapsing spontaneous pneumothorax and persisting spontaneous pneumothorax. This surgical method is performed under intubation anesthesia. Existing changes such as emphysematous bullae or fused strands are removed or cut. The parenchymatous defects occurring after surgical removal of bullae are bonded by means of 2 ml fibrin adhesive. 75% of the patients treated in this manner remain free from recurrences so that it was not necessary to perform thoracotomy although this had been originally indicated. Measures for pleurodesis that are not 'on target' must be rejected, since they do not help in removing the morphological changes at the lung surface. Surgical thoracoscopy as described is, therefore, in some cases an alternative to classical thoracotomy.