

# **An experience with the modified total pleural covering technique in a patient with bilateral intractable pneumothorax secondary to lymphangioleiomyomatosis.**

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## **Abstract:**

We present a case of bilateral intractable pneumothorax associated with a modified form of lymphangioleiomyomatosis (LAM), successfully treated with a previously reported surgical procedure, the total pleural covering (TPC) technique, under video-assisted thoracic surgery. The patient was a 28-year-old woman with bilateral pneumothorax secondary to LAM who had undergone thoracoscopic surgery in another hospital. We performed bilateral TPC modified with a preceding coverage of air leak points with polyglycolic acid sheets for reinforcement. Although a minor air leak after the surgery necessitated a mild pleurodesis on the right side, the bilateral pneumothorax was well controlled, and no recurrence has been observed for 9 months. We believe that TPC is a safe and reliable procedure for the management of intractable pneumothorax secondary to LAM. It also has the potential to reduce risk of excessive bleeding in lung transplantation. © 2010 The Editorial Committee of Annals of Thoracic and Cardiovascular Surgery.

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