

Large emphysematous bullae: Successful treatment with thoracoscopic technique using fibrin glue in poor-risk patients.

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Abstract:

Five patients with poor lung function (FEV_1 , 0.8 to 1.0 L; MVV, 27 to 36 L/min) and large emphysematous bullae were operated on. Fibrin glue was introduced into the bullae through a thoracoscope. The results have been excellent and no serious perioperative or postoperative complications have occurred. The patients have all improved clinically and are very satisfied with the results. Postoperatively, FEV_1 was between 1.0 and 1.2, and MVV was 30 to 52 L. The clinical improvement was, however, larger than these figures illustrate. Our preliminary experience using this technique suggests that it can be used in patients with very low lung function with a minimal risk. We propose that all patients with severe emphysema should be screened for bullous components because improvement might be possible by operation with this minimally traumatizing technique.