

Minimally invasive management of traumatic lung herniation.

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Abstract

Post-traumatic pulmonary hernia can occur immediately after thoracic trauma or it may also appear months or even years after the onset. We report a case of a seventeen year-old male patient with thoracic blunt trauma secondary to high energy bicycle accident. Chest CT shows moderate hemothorax and pneumothorax, displaced fracture of the fifth left rib, and protrusion of pulmonary tissue through a chest wall defect. In the Emergency Room the patient presents with chest pain (7/10 in Visual Analog Scale) and respiratory distress. Video-assisted thoracic surgery approach was chosen. Hernia reduction, non-anatomic lingular resection and rib fracture external fixation using a titanium plate was performed. Traumatic pulmonary hernia is an uncommon complication of thoracic trauma which may constitute an emergency for the trauma or thoracic surgeon. The early management of this injury can be developed by minimally invasive approach with excellent results.