جامعه سوهاج کلیه الطب البشري قسم جراحه القلب والصدر محاضرات الفرقه السادسه \_مرس٢٠٢٠

By
Essam Elbadry (MD)

# Indications for surgical intervention in the treatment of pulmonary TB

By

**Essam Elbadry (MD)** 

## Surgical intervention in the treatment of pulmonary TB indications for surgery in TB treatment:

- 1. Failure of medical therapy in MDR-TB patients; evidenced by
  - 1. Persistent cavitary disease
  - 2. lung or lobar destruction
  - 3. Massive haemoptysis
  - 4. tension pneumothorax
- 2. persistent positivity of sputum-smear or sputum-culture despite adequate chemotherapy.
- a high risk of relapse (based on the drug-resistance profile and radiological findings)
- 4. localized lesion
- 5. progression of TB despite adequate chemotherapy

## Surgical intervention in the treatment of pulmonary TB indications for surgery in TB treatment:

#### continue .....

- 6. repeated haemoptysis or secondary infection
- 7. localized disease amenable to resection
- 8. polyresistant and MDR-TB
- 9. absence of any radiological and/or bacteriological improvements during the initial three to four months of chemotherapy
- 10. allergic, toxic and mixed side-effects of drugs
- 11. chronic diseases of the gastrointestinal organs hindering effective chemotherapy.

### Surgical intervention in the treatment of pulmonary TB

Management of complicated forms of TB

- Massive haemoptysis
- Bronchiectasis
- Bronchial stenosis
- Bronchopleural fistula
- Aspergilloma

## Contraindications for elective surgical treatment of pulmonary TB

contraindications for the surgical treatment of TB patients depend on :

- How extensive the process is to be
- Assessment of the patients'cardiopulmonary function
- o general state of heath.

#### Contraindications for elective surgical treatment of pulmonary TB:

- 1. extensive cavitary lesion of the both lungs
- 2. impaired pulmonary function test (FEV1 less than 1.5 L in cases of lobectomy and less than 2.0 L for pneumonectomy is planned )
- 3. pulmonary-heart failure (NYHA III—IV)
- 4. body mass index up to 40–50% of the normal range
- 5. severe co-morbidity (decompensation in diabetes, exacerbation of stomach and duodenum ulcers, hepatic or renal impairment)
- 6. active bronchial TB

#### Thank you