

Giant Bullae Causing Vanishing Lung Syndrome!

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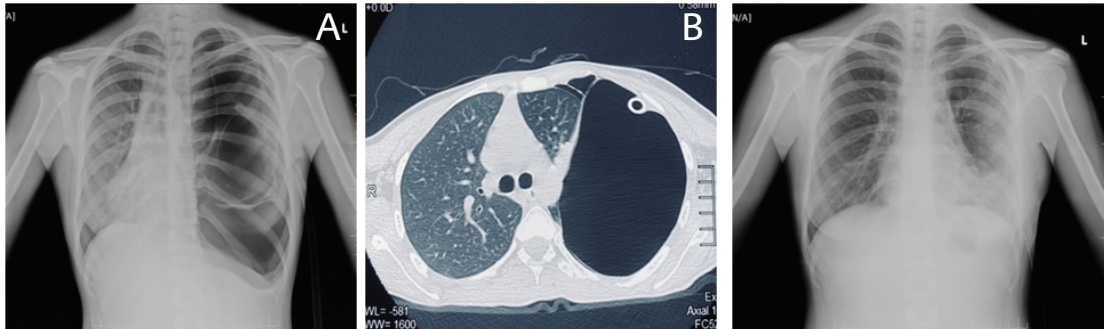


Figure A: Chest radiograph demonstrating a Type I Giant Bullous Emphysema (Hyper-lucent Zone) in the left upper lobe of lung with mediastinal shift to right side.

Figure B: High-Resolution Computed Tomography showing Giant Bullae occupying 90% of lung parenchyma on the left side with mediastinal shift to the right side.

Figure C: Chest radiograph showing near-complete lung expansion on Postoperative Day -03.

A 25-year-old female underwent Intercostal Drain (ICD) insertion on the left side of the chest two months back, elsewhere, in view of tension pneumothorax. ICD showed persistent air-leak and patient presented for further management. We performed a left-sided open bullectomy with pleurectomy and she had adequate lung expansion within three post-operative days. This is a classical case of vanishing lung syndrome, where giant bullae occupied more than 90% of left hemi-thorax with mediastinal shift. Successfully treated with bullectomy and recovery was uneventful.