

Images in Medicine

Calcified Empyema Thoracis

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A 56 year old male presented with breathing difficulty for 1 year, worsened over the past one week. He had a past history of pulmonary tuberculosis 20 years back. At that time intercostal tube drainage was done for empyema, which was diagnosed to be of tubercular etiology. He was commenced on antituberculous therapy but he was noncompliant and discontinued treatment prematurely. On admission, he was short of breath with digital clubbing. Examination revealed bilateral crepitations more on the right side, diminished breathsounds both infraaxillary and infrascapular areas. Routine investigations

were normal. Chest x- ray showed a curvilinear non homogenous opacity in left lower zone (Fig 1) in addition to volume loss and multiple nodular opacities on the left and pleural thickening on the right. It was found out to be an old organised, calcified empyema by CT thorax (Fig 2 and 3). Pulmonary function test showed a vital capacity of less than 70% and the patient was referred to cardiothoracic surgery department for decortication. The patient underwent partial decortication with thoracoplasty. Biopsy did not reveal any malignant transformation

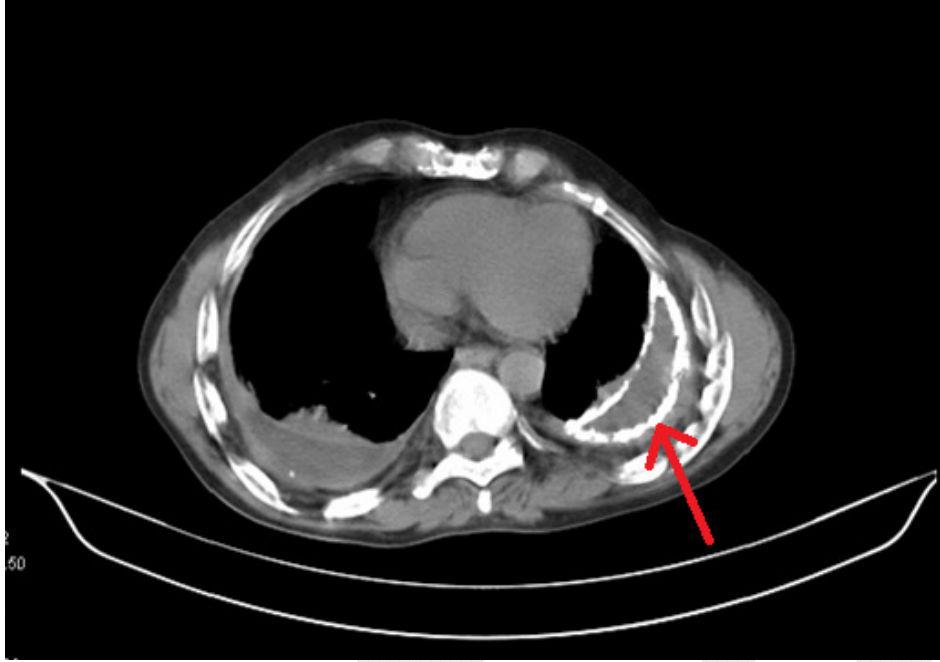


Fig 1 Chest X- Ray showing curvilinear opacity in the left lower zone



Fig 2 and 3 CT scan of chest showing old calcified empyema with fibrosis on the left side

Fig. 3



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