



Pleural Aspergillosis



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Background

Pleural aspergillosis is an uncommon disease; only 25 cases have been reported in the literature. Pleural Aspergillosis is a rare entity, with most of the cases occurring on a background of lung disease or surgery. The pleura is infected by aspergillus through bronchopleural or pleurocutaneous communication.

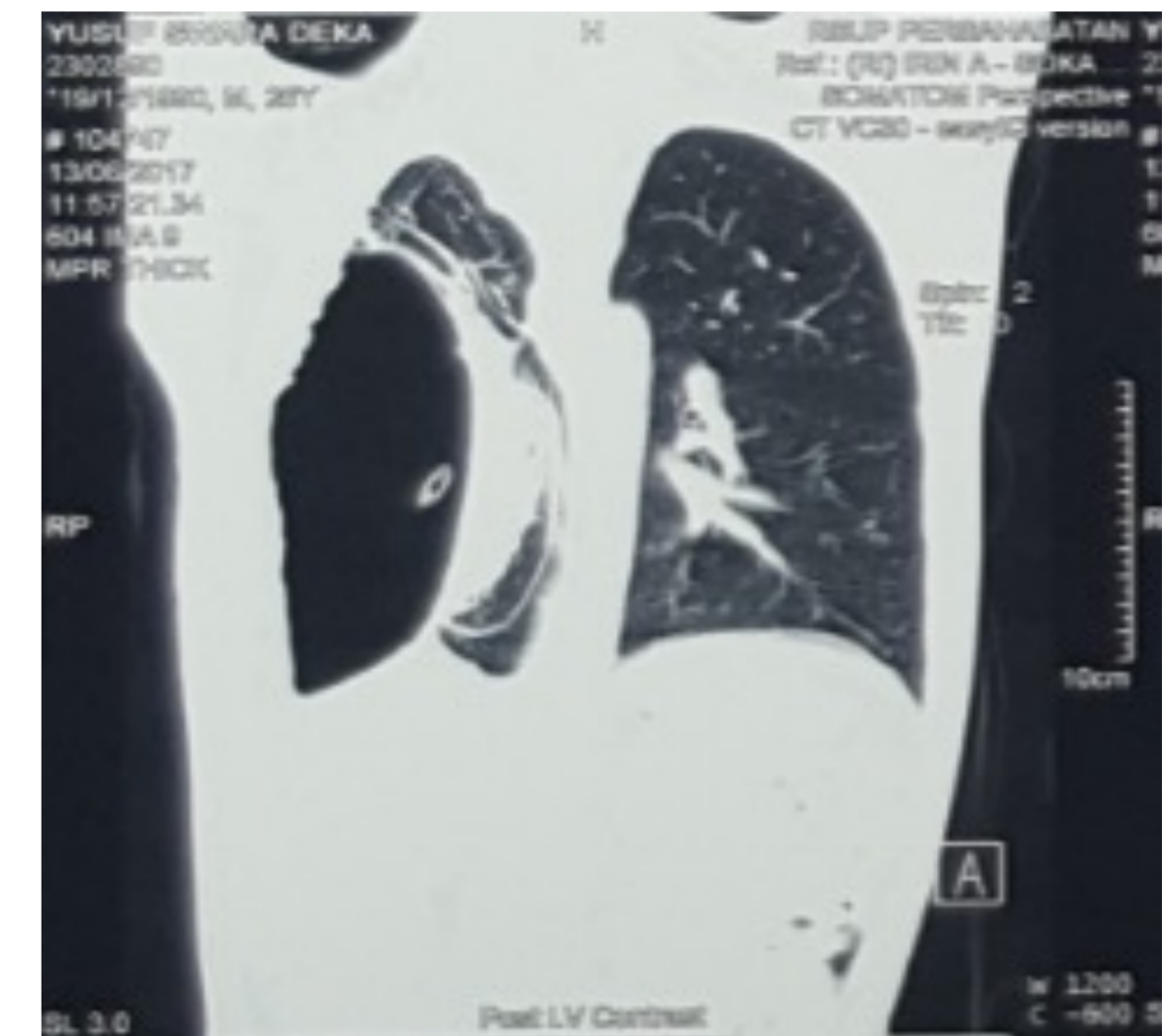
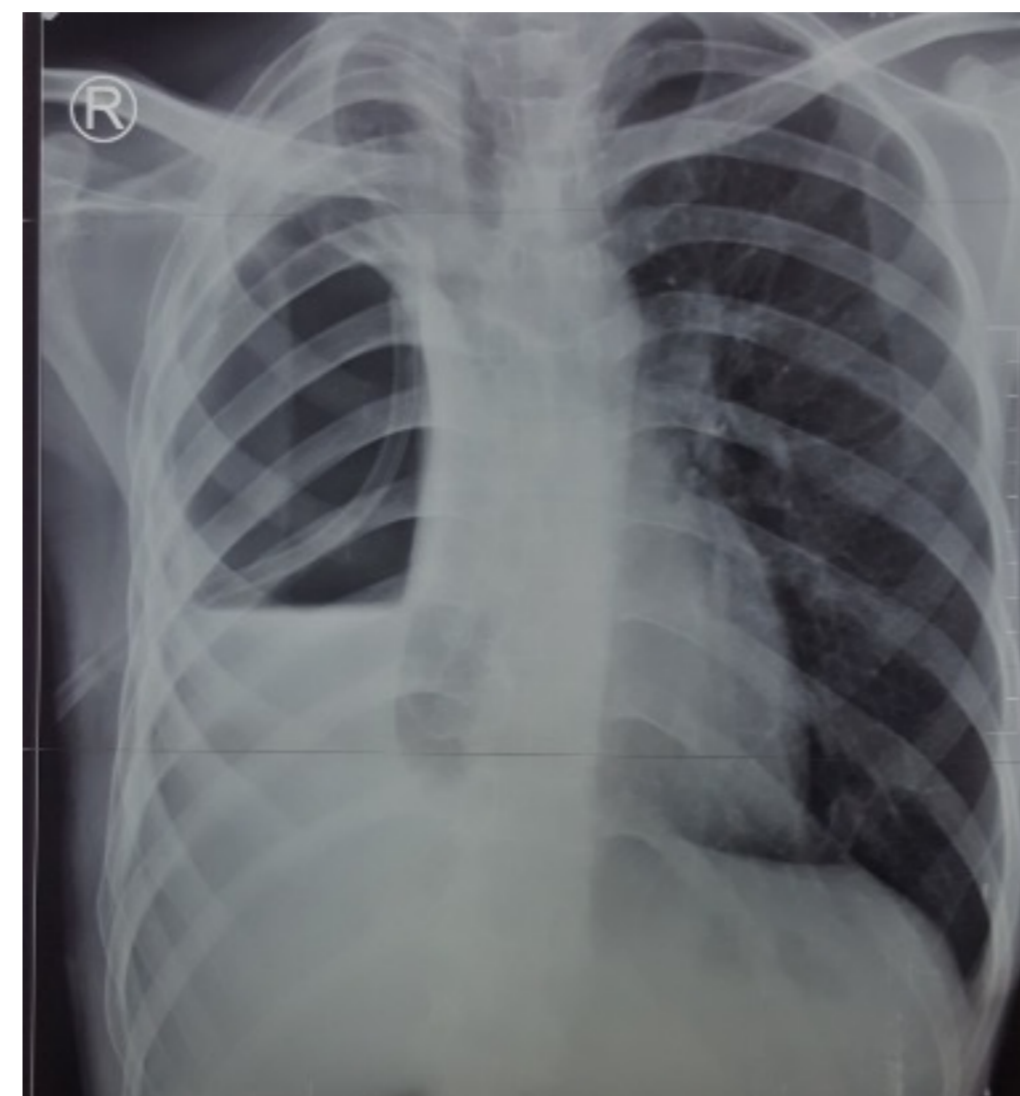
Aspergillus may cause a broad spectrum of disease in the human host, ranging from hypersensitivity reactions to direct angioinvasion. Aspergillus primarily affects the lungs, causing four main syndromes, including allergic bronchopulmonary aspergillosis (ABP A), chronic necrotizing Aspergillus pneumonia, aspergilloma, and invasive aspergillosis.

Case Reports

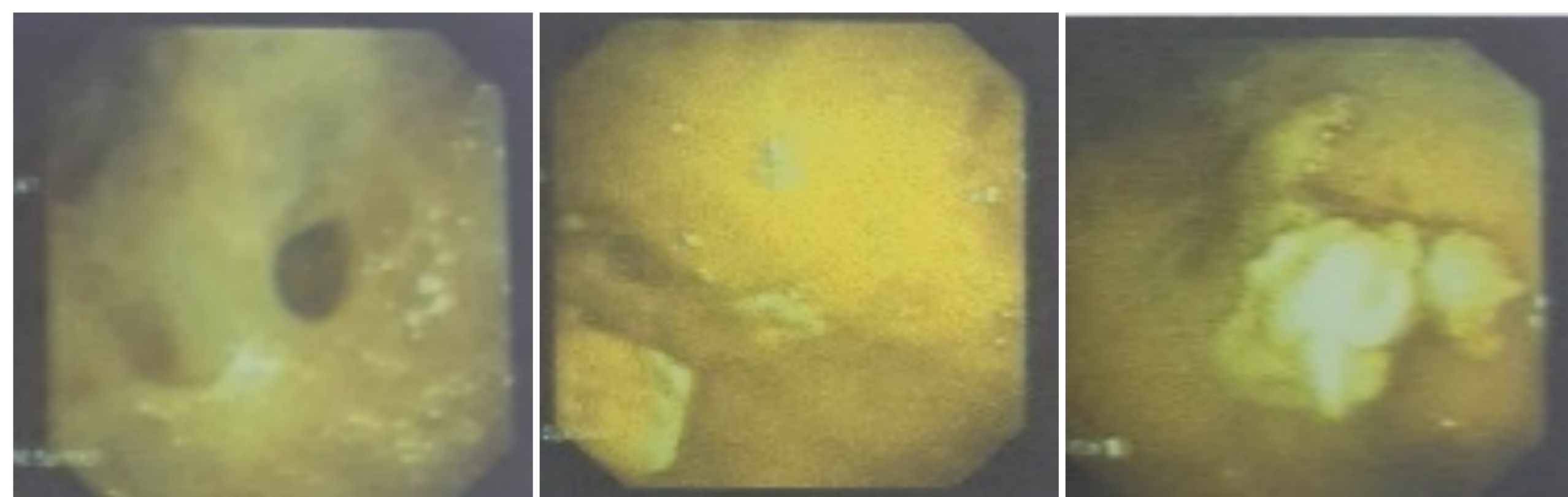
We report a case of a 26-year-old male who developed pleural Aspergillosis in the absence of any obvious predisposing factors. Patient presented with fever, dry cough and left sided chest discomfort of 6 weeks duration. A chest radiograph revealed features of the right hydropneumothorax. A chest CT scan showed a bronchiectasis, atelectasis, and right hydropneumothorax. Bronchoscopy showed partial compression of right upper lung, middle lobe and right lower lobe. Pleuroscopy showed wide fibrosis tissue in pars diaphragmatic, apex, visceral pleural. The pleural biopsy resulted an aspergillosis.

Conclusion

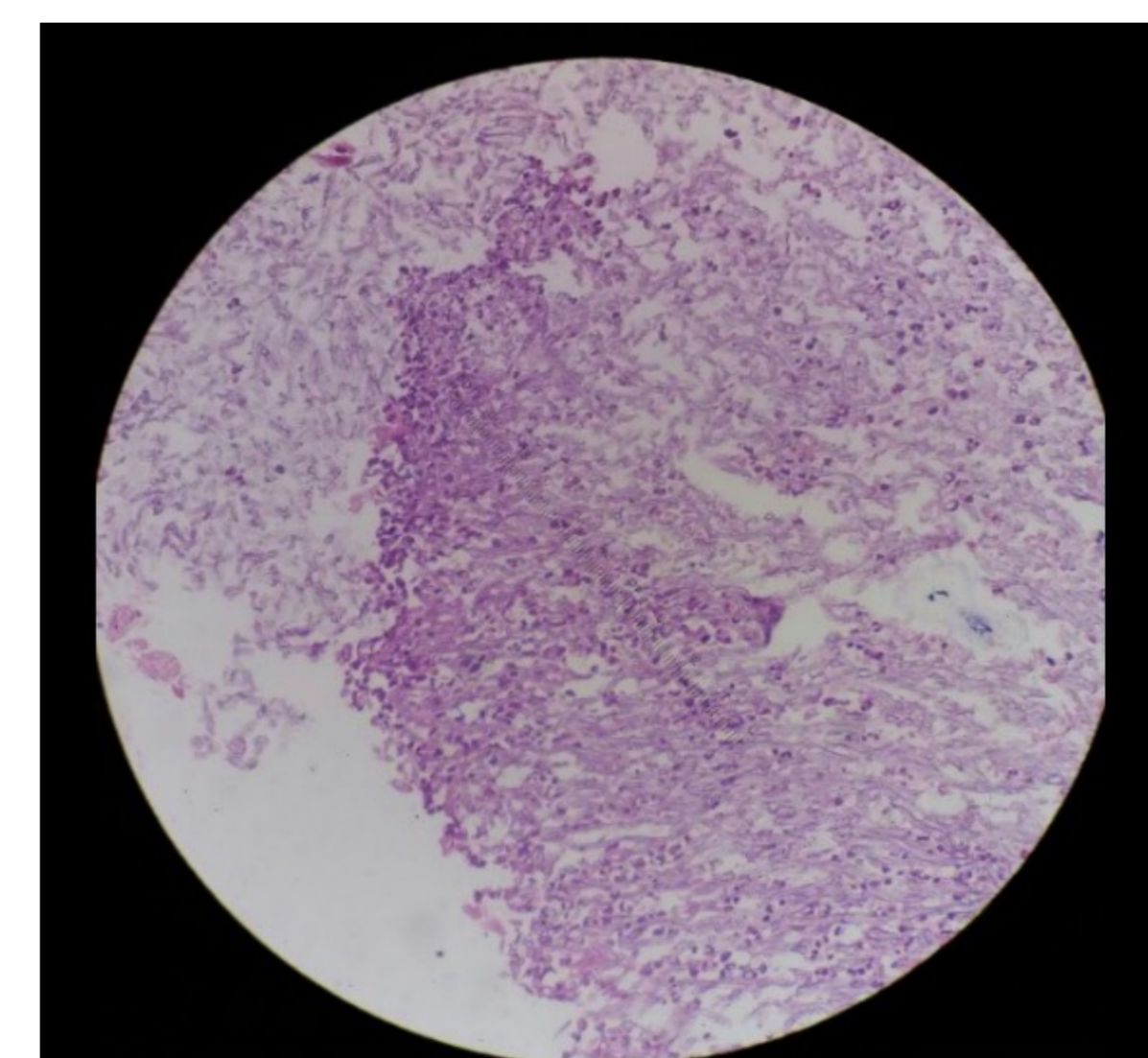
Pleural aspergillosis is a rare disease and to diagnosis of pleural aspergillosis we must performed medical thoracoscopy.



Radiologic features. A) Chest x-ray showed right hydropneumothorax with air fluid level and right lung collapse. B and C) Thorax CT scan showed air fluid level and right lung collapse.



Pleuroscopic findings showed wide fibrosis of either pleural parietal or pleural visceral. A) apex, B) posterior, and C) pars diaphragmatica.



Pathological findings showed colony of hyphae as well as acute and chronic tissue inflammation confirmed to aspergillosis.

References

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2. Yonsei Med J. 1988;29(1):84-8.
3. Med Mycol Case Rep. 2020;28:4-7.
4. Am J Respir Crit Care Med. 2021;203(1):e1-e2.