

The chest drainage tube was removed, and the patient was discharged home.

Conclusions; Reports on FFP utilization show no associated complications, as well as high success rates in treating air leaks. Taking all of the above into consideration, as well as the already high burden of the patient, the surgical team decided upon utilization of readily available FFP units instead. To the best of our knowledge, this is the first report of FFP employed for chemical pleurodesis in a patient with COVID-19 related pneumonia.

Keywords: argon plasma coagulation; autologous blood pleurodesis; spontaneous pneumothorax; thoracoscopy.

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A Rare Case of Spontaneous Pneumothorax Recurrence 30 Years After Surgery in a Patient with Birt-Hogg-Dube Syndrome

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Abstract

Introduction: Birt-Hogg-Dube syndrome (BHDS), also known as Hornstein-Knickenberg syndrome is a rare, autosomal dominant genetic disorder characterized by a triad of clinical manifestations: skin fibrofolliculomas, renal tumors, and multiple pulmonary cysts. The exact incidence of BHDS syndrome is unknown. This hereditary syndrome is caused by mutations in the folliculin (FLCN) gene, located on chromosome 17p11.2, which encodes the folliculin protein.

Material and Methods; This case report aims to highlight the importance of increased vigilance and long-term follow-up in BHDS patients, even decades after surgical intervention, to detect and manage potential pulmonary complications effectively.

Results; We present a unique case of spontaneous pneumothorax recurrence in a 63-year-old patient with

a history of Birt-Hogg-Dube syndrome. The patient had undergone surgical treatment for pneumothorax 30 years ago and remained asymptomatic until presenting to our clinic with acute dyspnea and a dry cough. A recurrent pneumothorax was diagnosed and treated with a chest tube. Further chest imaging revealed extensive ground-glass opacities and cysts in both lungs. The patient was diagnosed with active pneumonia. A conservative approach was adopted due to the pneumonia diagnosis, and the patient showed a successful recovery without pneumothorax recurrence.

Conclusions; This case highlights the importance of long-term follow-up in patients with Birt-Hogg-Dube syndrome and previous pneumothorax episodes.

Keywords: Birt-Hogg-Dube syndrome; Spontaneous pneumothorax; pneumothorax recurrence.

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Optimizing Chest Trauma Management: Strategies and Guidelines

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Abstract

Introduction; Chest trauma, resulting from both blunt and penetrating mechanisms, poses a significant health threat, and its management demands precise strategies and adherence to established guidelines. This presentation introduces a comprehensive presentation on optimizing chest trauma management, delving into essential strategies and guidelines for healthcare professionals.

The presentation begins by outlining the various types and mechanisms of chest trauma, such as blunt and penetrating injuries, with a focus on their significance and prevalence in healthcare settings.

Subsequently, the initial assessment of chest trauma patients takes center stage. This involves a primary survey encompassing airway assessment and management, breathing assessment and intervention, circulation assessment and resuscitation, disability assessment, and environmental control. It continues with a secondary

survey, including history-taking and a detailed physical examination, accompanied by diagnostic modalities like chest X-rays, computed tomography scans, ultrasound, and arterial blood gas analysis.

The presentation then proceeds to address specific chest trauma injuries, including rib fractures, flail chest, pneumothorax, hemothorax, cardiac injuries, pulmonary contusion, and tracheobronchial injuries. The various management approaches are discussed, ranging from pain management, oxygen therapy, chest tube placement, surgical interventions, cardiac tamponade management, to controlling massive hemorrhage.

Additionally, it highlights complications and outcomes related to chest trauma, including long-term effects, rehabilitation, and follow-up. The critical role of prevention, pre-hospital care, and guidelines and protocols such as Advanced Trauma Life Support (ATLS) and those from the Eastern Association for the Surgery of Trauma (EAST) are emphasized.

Real-life case studies are presented to provide practical insights into chest trauma management, ensuring a comprehensive understanding of the topic.

In conclusion, the abstract emphasizes the significance of early recognition, appropriate management, and continuous education and training in chest trauma cases to optimize patient outcomes.

This presentation offers a holistic perspective on chest trauma management and equips healthcare professionals with the knowledge and tools to enhance the care provided to patients with chest trauma.

Keywords; Education, Trauma, Training, ATLS, Emergency medicine

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Varicose Ulcers of the Lower Extremities

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Abstract

Introduction; Venous ulcers are the most common ulcers of the lower limb. It has a high morbidity and results in economic strain both at a personal and at a state level. Chronic venous hypertension either due to primary or secondary venous disease with perforator paucity, destruction or incompetence resulting in reflux is the underlying pathology, but inflammatory reactions mediated through leucocytes, platelet adhesion, formation of pericapillary fibrin cuff, growth factors and macromolecules trapped in tissue result

in tissue hypoxia, cell death and ulceration.

Methods and Material; Literature Review. Developed under the auspices of the American venous forum, the clinical etiological anatomical pathological (CEAP) classification encompasses clinical (based on objective signs), etiological (congenital, primary and secondary), anatomical (distribution of reflux and obstruction) and pathophysiological (related to reflux or obstruction) mechanisms of venous disease. The clinical portion includes seven categories from non-existent venous disease to ulceration.

Results; Conventional surgery consists of saphenofemoral/saphenous-popliteal flush ligation, disconnection of major tributaries, stripping/avulsion of varicose veins and perforator ligation through long incisions. This surgery aims at only the superficial venous system. Subfascial endoscopic perforator ligation

Standard laparoscopic equipment with two 10-mm ports is used to ligate the incompetent perforator veins.

Conclusion; Venous ulcers are the most common of all leg ulcers, with high morbidity and strain on economic resources, and have a negative impact on quality of life. It is unfortunate that many a times it is not properly diagnosed and, unnecessarily, expensive treatment is undertaken.

Keywords; Compression therapy, Surgery on veins, Venous hypertension, Venous ulcers Indian Jou

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Rhabdomyolysis and acute Kidney Injury Following Trauma: A Comprehensive Analysis

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Abstract

Introduction; Physical trauma is a global health concern, contributing to more than one in every ten deaths. Although direct, severe kidney trauma is relatively rare, trauma to extrarenal tissues often leads to the development of acute kidney injury (AKI). Several factors, such as hemorrhagic shock, rhabdomyolysis, nephrotoxic drug use, and infectious complications, can trigger and exacerbate trauma-related AKI (TRAKI), particularly in the presence of pre-existing or trauma-specific risk factors.

Material and Methods; A literature search was conducted in Medline and PubMed to identify relevant clinical trials investigating trauma's effects on kidney function

Results; Injured, hypoxic, and ischemic tissues expose the