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RESEARCH BULLETIN

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Surgical

Intrathoracic Gossypiboma After Spinal Operation

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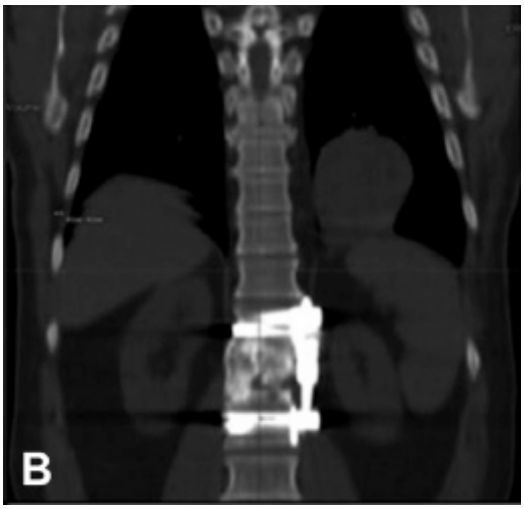
CASE REPORT

Gossypiboma is an aseptic foreign body reaction with fibrosis and granuloma formation secondary to retained surgical sponges. Main sites of involvement are the abdomen, pelvis, and thorax, with an average discovery time of 6.9 years.[1]

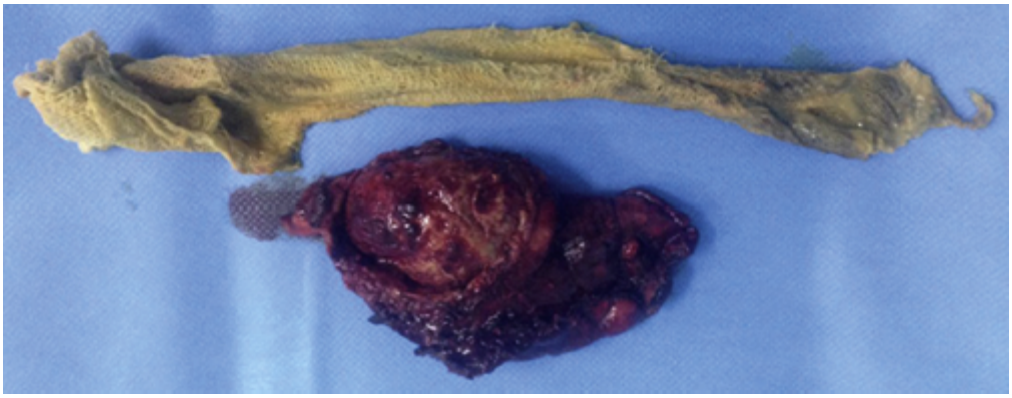
A 59-year-old man presented to the author's institution's emergency department with left-sided pleuritic chest pain, dyspnea, and chronic cough. He had undergone a spinal operation after a motor vehicle accident 14 years before.

His physical examination revealed diminished breath sounds and fine crepitations at the lower lung zone.

Subsequently, a thorax CT showed a 5.3-cm-diameter, well – defined mass along the posteromedial aspect of the left hemidiaphragm at the lower lobe (Fig. B). The mass was slightly inhomogeneous and hypodense, with a thin enhancing capsule (Fig. C).



A left posterolateral thoracotomy was performed for excision of the lesion. Gross examination showed that the mass was a retained surgical gauze (image below). No radiopaque marker was visible. With a diagnosis of gossypiboma, the lesion was totally excised.



COMMENT

The patient with inthratoracic gossypiboma may present with fever, cough, hemoptysis, weight loss, dyspnea, and shoulder pain, or can be asymptomatic.[2]

Radiologic features of gossypiboma vary based on location, type, and chronicity of the foreign body reaction and the presence of a radiopaque marker.[3]

The absence of a thoracic surgical history makes this case unique. Although a careful review of the medical history and imaging is necessary, the patient's surgical history outside the thoracic cavity may not alert the physician to intrathoracic gossypiboma.

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1. Koul PA, Mufti SA, Khan UH, Jan RA. Intrathoracic gossypiboma causing intractable cough. Interact Cardiovasc Thorac Surg 2012;14:228-30.
2. Karabulut N, Herek D, Kiroglu Y. CT features of intrathoracic gossypiboma(textioloma). Diagn Interv Radiol 2011;17:122-4.
3. Park HJ, Im SA, Chun HJ, Park SH, O JH, Lee KY. Changes in CT appearance of intrathoracic gossypiboma over 10 years. Br J Radiol 2008;81:e61-3.

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