

Management of Chylothorax in Esophageal Surgery by Minimally Invasive Thoracoscopic Approach

Mircea Gheorghe, Florin Achim, Petre Hoara, Adrian Constantin, Silviu Constantinoiu
General and Esophageal Surgery Department, Center of Excellence in Esophageal Surgery,
Sf. Maria Clinical Hospital, Bucharest
Carol Davila University of Medicine and Pharmacy, Bucharest, Romania

Abstract

Chylothorax is a rare complication, especially after esophageal cancer surgery. It may occur mainly in the thoracic stage of esophagectomy. The management of chylothorax is usually conservative, surgical reoperation with thoracic duct ligation being reserved for those cases refractory to that treatment. We discuss issues of diagnosis and therapeutic attitude, as evidenced by the literature, although a general consensus has not been established, most likely due to the low frequency of this complication. We emphasize the minimally invasive thoracoscopic approach, as it has been applied for two cases with this type of complication. A high rate of suspicion for thoracic duct injury should be maintained in all patients after esophageal surgery, with any pleural effusion entering the differential diagnosis of chylothorax

Key words: esophagectomy, chylothorax, thoracoscopic approach