

Medical Image of the Week: Severe Atelectasis with Tracheal Shift

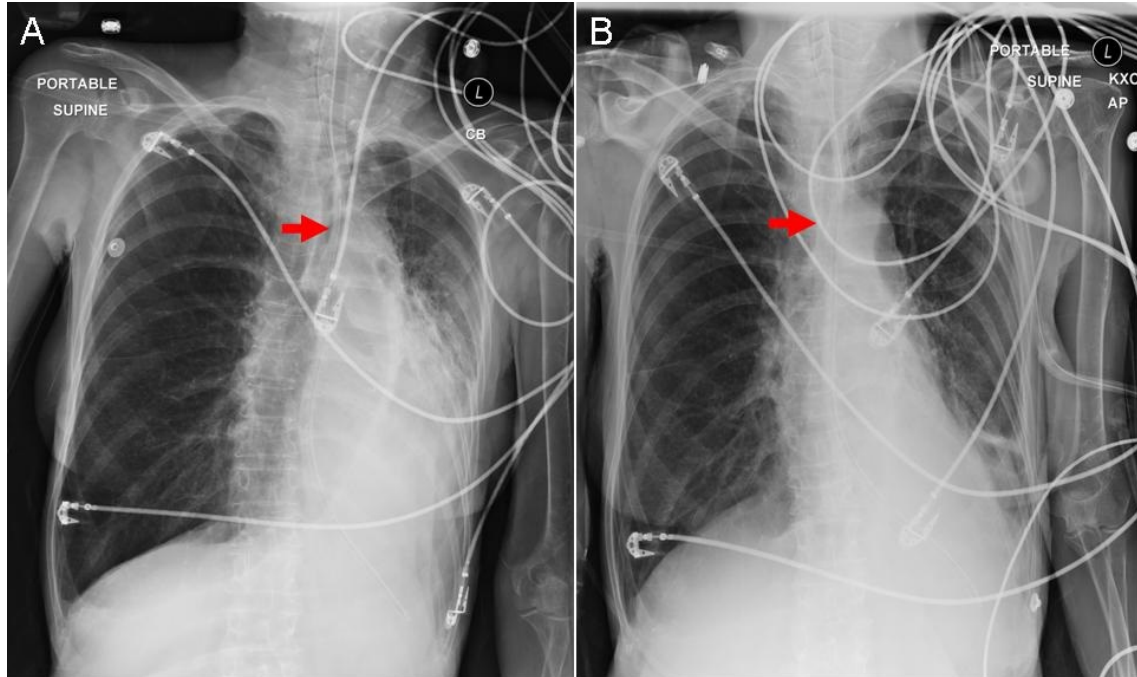


Figure 1. Panel A: Initial chest x-ray shows left lower lobe collapse due to mucus plugging and atelectasis with a significant shift of the trachea to the left (arrow). Panel B: Follow up chest x-ray shows marked improvement in aeration of the left lung and return of the trachea to midline (arrow).

A 59-year-old woman with severe oxygen dependent COPD presented with acute respiratory distress requiring intubation and was found to have left lower lobe collapse with tracheal shift. Her past medical history consists of severe malnutrition, alcohol abuse, and emphysema with recurrent pneumonias associated with acute respiratory failure often requiring intubation. She has greater than a 50-pack year history of tobacco use. She has undergone bronchoscopy and multiple CT Chest imaging without evidence of an endobronchial lesion or malignancy. Postural drainage and percussion along with antibiotics and inhaled bronchodilators resulted in marked improvement in the left lower lobe.

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