Thoracic Surgery in Tuberculosis

A Statement of the Subcommittee on Surgery

American Thoracic Society

Patients on Re-treatment Regimens

Patients on Re-treatment Regimens suffer from active tuberculosis, which may be due to a number of factors. The most common cause is a failure of previous treatment, either because the patient did not complete the course or because the initial treatment was not effective. Other factors that may contribute to the development of drug-resistant tuberculosis include poor adherence to the treatment regimen, the use of suboptimal drug combinations, and the presence of acquired resistance due to prior exposure to antimicrobial agents.

The extent of resection is determined by several factors, including the stage of disease, the location and size of the lesion, and the patient's overall health status. In general, a thoracoplasty is performed when there is a significant loss of lung tissue due to resection, or when the residual lung is not capable of providing adequate ventilation. The procedure involves the surgical removal of a portion of the rib cage, typically the 4th or 5th rib, in order to create a space that can be filled with a synthetic material such as gelfoam or methylmethacrylate. This material helps to stabilize the remaining lung tissue and prevent collapse.

