

Endovascular aortic repair for a pulmonary aspergilloma fistulized into the descending aorta: selective intubation with a single-lumen tube under fluoroscopic guidance

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A 35-year old man with acute monocytic leukaemia presented with haemoptysis. Computed tomography revealed a pulmonary aspergilloma fistulizing into the descending aorta (Fig. 1). The right main bronchus was intubated with a

single-lumen tube under fluoroscopy, and an endovascular aortic graft was placed (Fig. 2). There was no recurrence of haemoptysis. However, the patient died of sepsis after 3 months.

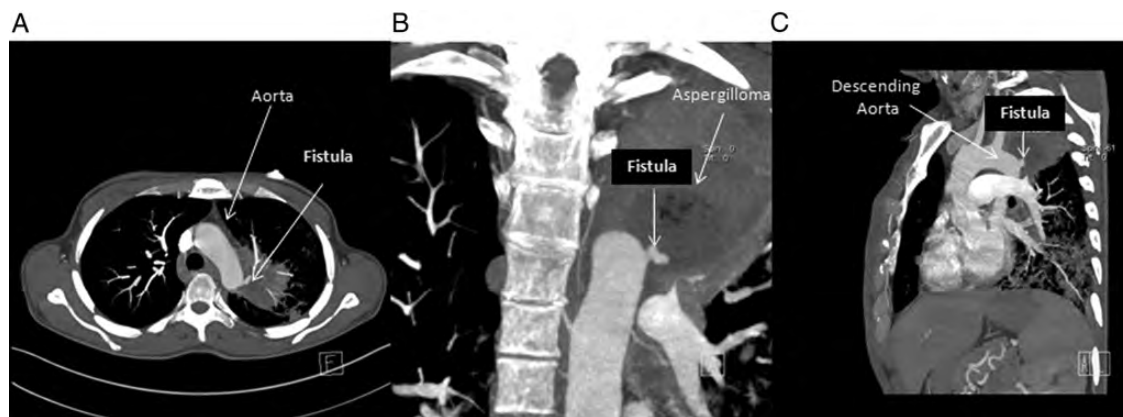


Figure 1: (A) Pulmonary aspergilloma in the left upper lobe, fistulized into the descending aorta. (B) Vertical tomography section. (C) Sagittal tomography section.

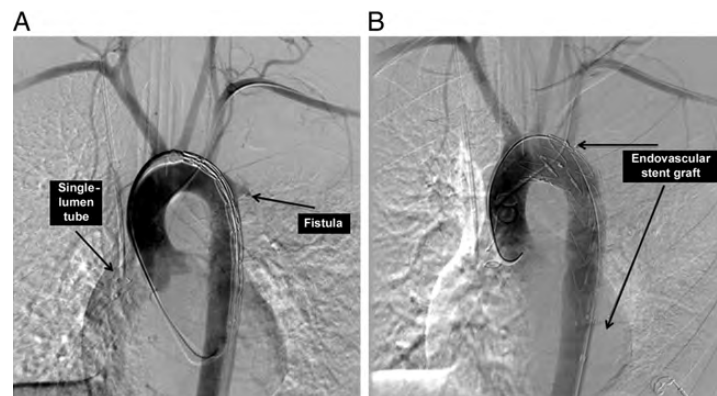


Figure 2: (A) Intubation of the right main bronchus with a single-lumen tube under fluoroscopic guidance; the fistula into the descending aorta is seen. (B) Control image after the procedure (endovascular aortic repair).