

primary studies - published, non RCT

Bronchial artery embolization for hemoptysis in young patients with cystic fibrosis.

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Study design (if review, criteria of inclusion for studies)

review of 15-year experience by searching the 1985-1999 radiology database

Participants

23 young patients who had been referred to the radiology department for angiography.

Interventions

Bronchial artery embolization (BAE)

Outcome measures

The medical records were retrospectively reviewed with regard to embolization success rates, number of repeat embolizations, survival times, and causes of death.

Main results

BAE was performed on 38 occasions in 20 patients. The mean age of patients at first BAE was 15 years (age range, 7-19 years). The majority (n = 34 [89%]) of BAEs were performed by using polyvinyl alcohol. The immediate success rate after BAE (ie, no recurrent bleeding within 24 hours) was 95% (36 of 38 BAEs). Eleven (55%) patients required more than one BAE, and the median time between first and second embolizations was 4 months (range, 5 days to 61 months). Three patients died as a consequence of severe hemoptysis during induction of anesthesia with intermittent positive pressure ventilation in preparation for BAE. The median survival duration after the first BAE (Kaplan-Meier estimate) was 84 months (average follow-up, 61 months; range, 5 days to 169 months).

Authors' conclusions

BAE had a high success rate for short-term control of bleeding; however, more than half the patients required repeat embolization during the long-term follow-up.

See also

Radiology. 2002 Jul;224(1):124-30.

Keywords

Hemoptysis; Respiratory Tract Diseases; Bronchial artery embolization; non pharmacological intervention - surg;