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TRACHEAL TUBE ASPIRATION : A CASE REPORT

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Abstract:

A 62-yr-old woman with a history of papillary carcinoma of thyroid who had undergone thyroidectomy and tracheostomy 5 years prior to admission, presented with bleeding from the site of tracheostomy. Attempts to control the bleeding failed, and the patient was immediately transported to the operating room. Awake intubation was performed and the endotracheal tube was sutured to the skin. A tear in the left common carotid artery was detected and repaired during neck exploration. To secure airway, the trachea was not extubated postoperatively. Six hours after surgery, the tracheal tube was found to be missing. The patient had no respiratory difficulty. Chest radiography revealed aspirated tracheal tube lodged in the left main bronchus. A tracheostomy was performed under local anesthesia, the aspirated tube was removed and a tracheostomy tube was inserted. The patient was discharged from the hospital 5 days later in a good condition.

Improper fixation of the tracheal tube and impaired airway reflexes due to old age might have led to tracheal tube aspiration.

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