REVERSIBLE BRONCHIECTASIS: INSIGHTS AND CASE REPORTS

¹Binod Kumar Choudhary¹, Gouri Mohan2, Md Parwez Alam³

¹Professor, Department of Respiratory Medicine, P.M.C.H. Patna, Bihar, India ²JR2, Department of Respiratory Medicine, P.M.C.H. Patna, Bihar, India ³JR2, Department of Respiratory Medicine, P.M.C.H. Patna, Bihar, India

Corresponding Author:

Binod Kumar Choudhary,

dr.bkchoudhary30@gmail.com)

Abstract

Reversible bronchiectasis describes a subtype of bronchiectasis where bronchial dilation can potentially be reversed following the management of the inciting triggers. Documented cases typically involve acute interventions that address the immediate causes of bronchial obstruction.

Keywords: Reversible bronchiectasis, Bronchial dilation, Inciting triggers.

INTRODUCTION

Bronchiectasis is generally considered a chronic and irreversible condition, marked by permanent dilatation and damage to the bronchial tubes due to various etiologies. However, the notion of "reversible bronchiectasis" has emerged, suggesting possible reversibility in cases where the triggering factors are controlled effectively and early. This condition, while not formally recognized in medical terminology, highlights scenarios where intervention can stabilize or even reverse the progression of bronchial dilatation. Such cases often involve prompt treatment of infections, removal of bronchial obstructions, or management of underlying allergic or autoimmune disorders.

CASE REPORT

We present a case of a 60-year-old man, a lifelong non-smoker with a history of benign prostatic hyperplasia, who experienced persistent symptoms of a chest infection that did not improve with antibiotics. The symptoms followed an episode of violent coughing triggered by peanut ingestion three months prior. Subsequent medical examinations, including a chest X-ray, indicated changes in the left lower lobe. Bronchoscopy later confirmed a peanut lodged in the bronchus, surrounded by mucosal erythema and edema. The obstruction was successfully removed, leading to significant symptom relief and eventual reversal of the bronchial changes noted on a follow-up CT scan.

DISCUSSION

Reversible bronchiectasis highlights the potential for bronchial dilation to be transient under specific conditions, such as prompt removal of obstructions (e.g., foreign bodies like peanuts) and effective management of infections. This condition challenges the traditional understanding of bronchiectasis as exclusively irreversible and emphasizes the importance of early and effective treatment. It underscores the variability in the progression of bronchiectasis and the potential for reversibility, particularly in cases linked to acute infections or foreign body aspirations.

DECLARATION OF PATIENT CONSENT

It is confirmed that appropriate patient consent was obtained for sharing the clinical details in this report. The patient agreed to the publication of the information with the assurance of anonymity and efforts to conceal identity.

REFERENCES

- 1. Tiddens HAWM, Meerburg JJ, van der Eerden MM, et al. The radiological diagnosis of bronchiectasis: what's in a name? Eur Respir Rev 2020;29. doi:10.1183/16000617.0120-2019. [Epub ahead of print: 30 Jun 2020].
- 2. Polverino E, Goeminne PC, McDonnell MJ, et al. European respiratory Society guidelines for the management of adult bronchiectasis. Eur Respir J 2017;50. doi:10.1183/13993003.00629-2017. [Epub ahead of print: 09 Sep 2017].
- 3. Wu X-L, Wu L, Chen Z-M. Unusual bronchial foreign bodies with localized bronchiectasis in five children. Case Rep Med 2019;2019:4143120.
- 4. Agarwal R. Bronchiectasis in acute pneumonia ... Pseudobronchiectasis. Chest 2007;132:2054–5.
- 5. Hill AT, Welham SA, Sullivan AL, et al. Updated BTS adult bronchiectasis guideline a multidisciplinary approach to comprehensive care. Thorax 2019;74:1–3.