

Images in cardio-thoracic surgery

Computed tomography imaging of a fistulating right pleural empyema in the inguinoscrotal region through the retroperitoneal space

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A 90-year-old man was referred to the urologist for a purulent secretion from a cutaneous fistula in the right inguinoscrotal region (Fig. 1). The patient underwent an abdominal and thoracic computed tomography (CT) scan,

which showed a basal right pleural empyema communicating with the inguinoscrotal region through the retroperitoneal space (Fig. 2).



Fig. 1. The image shows the right cutaneous inguinoscrotal fistula. The patient was treated conservatively by draining the right pleural empyema under CT guidance, using a double-lumen catheter to allow complete periodic irrigation with an antibiotic solution (rifamycin 500 mg/500 cm³). The patient recovered completely after 6 weeks of irrigation twice weekly.

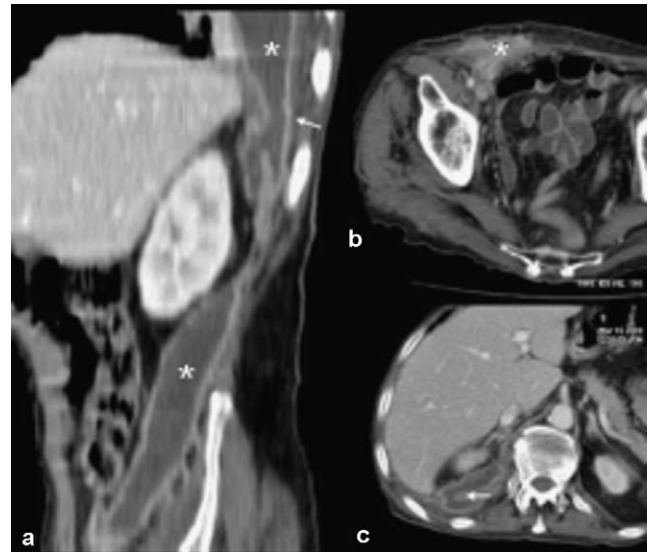


Fig. 2. The oblique sagittal reconstruction of the CT scan (a) shows the right pleural empyema (*) communicating with a retroperitoneal inflammatory collection (*) through the diaphragm (white arrow), with right inguinoscrotal extension (b); the trans-diaphragmatic communication is better visualised in the axial image (c).

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