Correspondence

The Fogarty balloon technique for the control of endobronchial bleeding

SIR,—Rigid bronchoscopic biopsy of suspected endobronchial tumours is indicated in many patients for assessment and diagnosis. This is usually a safe procedure but sometimes fleshy, vascular tumours and inflammatory lesions may cause bleeding, which has to be controlled by local pressure with an adrenaline-soaked swab. Occasionally bleeding is excessive and difficult to control and may be life threatening. Rarely emergency thoracotomy is necessary. Under these circumstances we have used a Fogarty's embolectomy catheter for providing local pressure to control bleeding. Use of the Fogarty's catheter has been well described in extraction of foreign bodies from the tracheobronchial tree¹⁻³ but its use in endobronchial haemostasis has not been documented. Over the past two years we have used this technique successfully in cases where endobronchial bleeding after biopsy was difficult to control by conventional methods.

If bleeding is excessive a size 4 arterial Fogarty catheter is introduced via the bronchoscope and positioned in the bleeding bronchus, preferably at the site of bleeding, and the catheter balloon is inflated. The balloon is left inflated for 10 minutes while careful watch is kept on the amount of blood loss, which is usually minimal. The balloon is then deflated and the catheter withdrawn and the bleeding site is reassessed. The procedure may be repeated if necessary. The possible haemorrhagic consolidation of the distal lung has not yet been encountered. Timely use of this technique can avoid excessive blood loss and gives time for deciding whether emergency thoracotomy is really indicated.

VR KSHETTRY

HFM BASSETT

Department of Cardiothoracic Surgery
Royal Manchester Infirmary
Manchester M13 9WL

¹ Ulliyot DG, Norman JC. The Fogarty catheter. An aid to bronchoscopic removal of foreign bodies. *Ann Thorac Surg* 1968;6:185-6.

² Saw HS, Ganendran A, Somasundaram K. Fogarty catheter extraction of foreign bodies from tracheobronchial trees of small children. *J Thorac Cardiovasc Surg* 1979;77:240-2.

³ Koslostze AM. The Fogarty balloon technique for the removal of foreign bodies from the tracheobronchial tree. *Surg Gynecol Obstet* 1982;155:72-3.

Notices

Symposium on interstitial lung disease

An international symposium on interstitial lung disease will take place in Seville, Spain, from 22 to 26 November 1983. The meeting is organised by the Association de Neumologos del Sur and further details may be obtained from Dr Marquez Varela, Secretaria del Symposium Internacional de Neumologia, Apartado de correo 3.133, Sevilla, Spain.

Recent advances in cardiopulmonary diseases

An international congress entitled "Recent Advances in Cardiopulmonary Diseases" will be held in Calcutta on 12-15 January 1984. The congress is sponsored by the East India Chapter of the International Academy of Chest Physicians and Surgeons and is supported by the American College of Chest Physicians. It is intended to cover the growing points of medical and surgical aspects of cardiopulmonary diseases. The closing date for abstracts is 31 August 1983. Further details can be obtained from Dr GC Mookerjee, Congress Governor, 14/B Puranchand Nahar Avenue, Calcutta 700-013, India.

International symposium on the pulmonary circulation

The Fourth International Symposium on the Pulmonary Circulation will be held in Prague, Czechoslovakia, on 4-6 July 1984. This symposium is sponsored jointly by the Societas Europaea Physiologiae Clinicae Respiratoriae and the European Society of Cardiology. The closing date for abstracts is 1 February 1984. Further information is available from Martin Riedel, Institute for Clinical and Experimental Medicine, Videňská 800, CS 146 22 Prague 4, Czechoslovakia.