PRESENTATION
A 48-year-old male with a medical history significant for diabetes, severe COPD, and 40 pack years of smoking, presented with a progressive cough and shortness of breath over a 3-month duration.

WORK UP
CT chest revealed right lung mass, mediastinal lymphadenopathy and severe stenosis of the bronchus intermedius and the right lower lobe. Imaging also revealed spinal lesions concerning for metastatic lung cancer.

INTERVENTION
Endobronchial mucosal invasion was found in distal bronchus intermedius and right lower lobe on bronchosopic airway exam. There was moderate stenosis in the bronchus intermedius and severe stenosis in right lower lobe bronchus. Nd:YAG laser was used to treat the endobronchial mucosal tumor. Most of the disease was infiltrative rather than exophytic so no mechanical excision was performed.

The decision was made to place AERO® Tracheobronchial stents to preserve the patency of the airway while patient started treatment and showed significant response as his respiratory symptoms were getting worse.

A 12mm x 30mm AERO® Tracheobronchial stent was placed in the bronchus intermedius and a 10mm x 10mm AEROMini® Tracheobronchial stent in the right lower lobe in a telescoping fashion.

An EBUS TBNA biopsy sample was obtained from the LN 11L and Station 7, with an on-site cytology preliminary identification of small cell carcinoma.

CONTINUED
FOLLOW UP

The final staging of the small cell lung cancer was determined to be T4N3M1. The patient received radiation to L3 lesion and completed Carboplatin, Etoposide and Tecentriq®. The patient is being closely followed and is doing well at post 6-months treatment. The future treatment plan included another bronchoscopy to assess for potential distal stent removal, but the stents have not been removed as the patient is feeling great and chose to delay the follow-up bronchoscopy to have the stents removed.

CONCLUSIONS

The use of AERO® Tracheobronchial stents in a telescoping configuration allows the stenting of a complete airway for treatment and relief of stenosis.