

Rapid pleurodesis for malignant pleural effusions: a pilot study



Study Author(s)

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Study Design

Prospective, single-arm study



Publication

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Study Location

United States



Study Length

6 months follow up



Study Objective

To evaluate the safety, efficacy, and feasibility in patients with malignant pleural effusions of a rapid pleurodesis protocol. The protocol combines medical thoracoscopy with talc pleurodesis and concurrent placement of a tunneled pleural catheter (TPC)



Key Endpoint(s)

Length of hospitalisation, number of days with the TPC, and quality of life



Patient Population

Patients with recurrent, symptomatic malignant pleural effusions



Treatment

Patients (n = 30) underwent medical thoracoscopy with placement of a TPC and talc poudrage. The TPC was drained until the output was < 150 mL per day on two consecutive drainage attempts and then removed



Key Findings

- Post-procedure hospitalisation lasted a median duration of 1.79 days
- Dyspnoea and quality of life improved in all patients
- Successful pleurodesis was achieved in 92% of patients
- TPC was removed at a median of 7.54 days
- Complications included fever, need for TPC replacement, and empyema



Study Conclusions

- Medical thoracoscopy and talc poudrage can be safely combined with concurrent TPC placement to deliver rapid pleurodesis for patients with malignant pleural effusions