

A Curious Case of Recurrent Pneumonia

Emily R. Thomas, DO

A 52-year-old woman presented to the emergency department in February 2012 with a productive cough of 2 months duration and recurrent pneumonia. The patient had a history of recurrent bacterial pneumonias and stage IIIC squamous cell esophageal cancer that was managed with chemotherapy and radiotherapy. Chest imaging (panel A) revealed a right lower lobe infiltrate consistent with a possible early pneumonia. Because of the large amount of expectoration, computed tomography was performed, results of which revealed a large tracheoesophageal fistula approximately 1 cm proximal to the carina (panel B). The patient was sent to a tertiary care facility for treatment and was lost to follow-up.

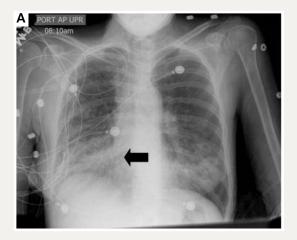
In adults, 50% of acquired tracheoesophageal fistulas manifest in the context of a mediastinal malignancy. Mediastinal malignancies, which have an incidence of 4.5% in US adults, are caused by esophageal cancer in 77% of cases. Tracheoesophageal fistula is considered an urgent oncologic complication. Physicians should therefore consider tracheoesophageal fistula in the differential diagnosis for pneumonia in patients with a history of mediastinal cancer, particularly esophageal cancer.

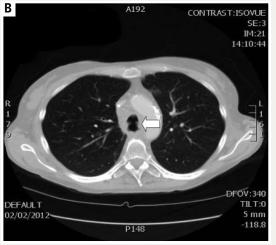
References

1. Diddee R, Shaw IH. Acquired tracheo-oesophageal fistula in adults. Contin Educ Anaesth Crit Care Pain. 2006;6(3):105-108.

2. Burt M, Diehl W, Martini N, et al. Malignant esophagorespiratory fistula: management options and survival. *Ann Thorac Surg*. 1991;52(6):1222-1228.

3. Quint LF. Thoracic complications and emergencies in oncologic patients. *Cancer Imaging.* 2009;9(A):S75-S82.





Financial Disclosures: None reported.

Address correspondence to Emily R. Thomas, DO, Assistant Professor, West Virginia School of Osteopathic Medicine, 400 N Lee St, Lewisburg, WV 24901-1128.

E-mail: ethomas@osteo.wvsom.edu

Submitted March 23, 2012; final revision received May 29, 2012; accepted June 5, 2012.

Authors interested in contributing to "Clinical Images" should refer to the JAOA's "Information for Authors" at http://www.jaoa.org/misc/ifora.xhtml. Manuscripts should be submitted at http://mc04.manuscriptcentral.com/jaoa.