LUNG LOBE TORSION

What is it? Each lung is composed of several lobes (2 on the left and 4 on the right). If one of these lobes twists on its blood vessels and bronchus, it is a lung lobe torsion. Once a lobe is twisted, it becomes atelectic (collapsed) and can also become compromised due to lack of blood supply.

What animals are affected? Lung lobe torsion can occur in any animal but is most commonly seen in those dogs with very deep chests. Afghan hounds are commonly affected.

What are the clinical signs? Signs can include lethargy, inappetence, coughing—sometimes with blood present — dyspnea (difficult respiration), and fever.

How is it diagnosed? Diagnosis is made with radiographs of the thorax. Almost all patients will have pleural effusion (fluid within the chest), and a consolidated lung lobe is often seen. Bronchoscopy can also show the twisted, collapsed bronchus.

How is it treated? Treatment involves stabilizing the patient by removing excess pleural effusion and providing oxygen therapy if needed, followed by surgical exploratory of the chest and removal of the torsed, collapsed lung lobe. This procedure is called a lobectomy.

What is the aftercare? The patient will remain hospitalized at least one night after surgery and will likely have a chest tube in place for 12 to 48 hours to help evacuate air (a result of the surgery) and fluid from the chest. Once the patient is discharged, they will have at least two weeks of restricted activity.

What is the prognosis? Prognosis is good for dogs with lung lobe torsion that have undergone successful surgery.

Can it be prevented? Early detection and treatment of pleural effusion may help prevent subsequent lung lobe torsion (it often is secondary to the fluid in small breeds). In most cases, however, there is no way to prevent it from occurring.