A Retrospective Analysis of 736 Cases of BAE by Metallic Coil

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[Background] Bronchial artery embolization (BAE) is an indispensable therapeutic strategy for hemoptysis treatment in respiratory diseases, and is a modality that should be considered along with treatments for underlying diseases. [Method] We report 736 cases of BAE by metallic coil performed between January 2007 and December 2018. [Results] The underlying diseases of BAE cases were as follows: pulmonary nontuberculous mycobacterial disease (NTM) 27%, bronchiectasis 23%, pulmonary aspergillosis (ASP) 17%, idiopathic hemoptysis 13%, and old pulmonary tuberculosis 10%. ASP, which accounted for about half in 2007, tended to give up its first place to NTM as NTM cases increase over time. In addition, bronchiectasis was almost unchanged at 20% of the breakdown. Hemoptysis control rate were as follows: 70% with ASP and NTM, 80% with bronchiectasis and old pulmonary tuberculosis, and 92% with idiopathic hemoptysis during the mean observation period of 21.8 months. [Conclusion] BAE may be regarded as a standard treatment for hemoptysis control. Since chronic pulmonary infections accounted for 80% of hemoptysis, infection control of the underlying diseases was particularly important to treat hemoptysis especially in NTM and ASP. On the other hand, BAE has become the most optimal therapeutic strategy for idiopathic hemoptysis.<!--EndFragment-->