Trees Don’t Grow in the Lungs!

To the Editor:

We read with interest a recent article1 on the BBC Web site of a 5-cm fir tree discovered by doctors in the lungs of a Russian botanist who underwent resection for a “lung tumor” after he presented with chest pain. The surgeon who operated on him commented that “The branch was green, as if it had just been taken from the wood. It’s still a mystery how the tree got in there.” It was thought that the patient had inhaled a seed, which then grew into a tree inside his body! Two pulmonologists from the Second Military Medical University, 168 Changhai Rd, Shanghai 200433, People’s Republic of China; e-mail: liq524@yahoo.com.cn

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REFERENCES


Could Fiberoptic Bronchoscopy and CT Lung Scan Differentiate Ventilator-Associated Tracheobronchitis From Ventilator-Associated Pneumonia?

To the Editor:

I read with interest the article in CHEST (February 2009) by Dr. Craven and colleagues1 on ventilator-associated tracheobronchitis (VAT). In this general review, the authors elegantly discussed recent findings on the impact of targeted antibiotic therapy on patient outcomes.2,3 They outlined the difficulty in differentiating VAT from ventilator-associated pneumonia (VAP) and suggested fiberoptic bronchoscopy and CT lung scan to confirm the diagnosis of VAP. However, some clarification would be helpful for ICU physicians.

The authors stated that quantitative samples obtained from the distal airway using bronchoscopic or nonbronchoscopic lavage or specimen brush were used to confirm VAP. Do the authors