

Title : Transabdominal assisted ICD insertion minimises the malposition of tubes our experience compared with standard technique.

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Asbtract :

Background: Tube thoracostomy is widely used throughout the medical, surgical, and critical care specialities. It is generally used to drain pleural collections either as elective or emergency. Complications resulting from tube thoracostomy can occasionally be life threate 5 th intercostal space in safe triangle. Still the risk of lung injury or malplacement is possible. In modified technique ICD is inserted into pleural cavity before abdomen closed the tube thoracostomy by standard technique and our assisted technique. cases of carcinoma of the postcricoid region since Jan 2012 to Dec 2016. They u esophagectomy with gastric pullup. Random cases were selected for intercostals drain insertion either trans assisted technique or by standard technique. ICD insertion by standard technique and other 50% by trans malposition of drains in standard technique which required reposition. None of the patients had malposition of ICD in modified technique. Conclusion insertion technique has lower risk of complications and it can be recommended.