SAQ 7

A 75 yr old male presents to your Emergency Department complaining of progressive shortness of breath over 2 weeks.

a. Describe and interpret the patient's x-ray (4 Marks)

- Right pleural effusion mod / large
- Absent right breast shadow
- Enlarged left atrial appendage / Cardiomegaly
- No mediastinal shift
- PA CXR
- Lt hemithorax hyper-expanded nil lesion seen

b. List 4 criteria for categorising a pleural effusion as an exudate (4 Marks)

1 mark for each of up to 4 marks:

- Classic definition pleural fluid protein >30g/L
 - Not accurate when serum protein abnormal or pleural fluid protein close to 30g/L
- Light's Criteria
 - Pleural fluid protein / serum protein is > 0.5
 - Pleural fluid LDH / serum PDH is >0.6
 - Pleural fluid LDH >2/3 upper limit of lab normal for serum LDH
- Other's
 - Pleural-fluid cholesterol level >1.5 mmol/L
 - Pleural-fluid cholesterol level >1.1 mmol/L
 - Pleural-fluid/serum cholesterol ratio >0.3
 - Serum/pleural-fluid albumin level ≤1.2 g/dL

c. List 4 causes of pleural transudates (4 Marks)

- Very common
 - Left ventricular failure
 - Liver cirrhosis
- Less common
 - Hypoalbuminaemia
 - Peritoneal dialysis
 - Hypothyroidism
 - Nephrotic syndrome
 - Mitral stenosis
- Rare
 - Constrictive pericarditis
 - Urinothorax
 - Meig's Syndrome

d. List 4 causes of pleural exudates (4 Marks)

- Common
 - Malignancy
 - Parapneumonic effusion
 - Tuberculosis
- Less common
 - Pulmonary embolism
 - *Rheumatoid / Autoimmune*
 - Benign asbestos effusion
 - Pancreatitis
 - o Post-MI
 - Post-CABG
- Rare
 - Yellow nail syndrome / lymphatic disorders
 - o Drugs
 - o Fungal

Answers taken from British Thoracic Society Pleural Disease Guideline 2010 (https://www.britthoracic.org.uk/document-library/clinical-information/pleural-disease/pleural-disease-guidelines-2010/pleural-disease-guideline/) & Dunn, Emergency Medicine Manual, 5th Edition, Chp 35, Pleural Effusion

CXR and description taken from Radiopedia case of Unilateral Pleural Effusion by Dr Frank Gaillard http://radiopaedia.org/cases/pleural-effusion-unilateral-malignant