

Endobronchial valves: an emerging therapeutic alternative to VATS for the surgical management of advanced emphysema

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I read with great interest the recent article by Lin and Luh on the treatment of patients with bullous emphysema with video-assisted thoracoscopic surgery.¹ The topic is highly interesting. However endobronchial valves have emerged over the past few years as a highly effective and efficient alternative to video-assisted thoracoscopic surgery.

For instance, Scirba et al have recently demonstrated the effectiveness of endobronchial valves in patients with advanced stages of emphysema.² Similarly, air leaks such as those resulting in subcutaneous emphysema and those secondary to iatrogenic chest tube placement can be effectively treated with endobronchial valves.³ Endobronchial valves can also be used for the closure of broncho-pleural fistulas in patients with pleural empyema.⁴ Endobronchial valves can also be used for producing atelectasis in affected lobes in patients afflicted with tuberculosis, thus limiting the spread of infection.⁵ Recent studies also suggest that endobronchial valves may play a major role in lung transplant surgeries in the near future.⁶

The above examples clearly illustrate the increasing role and efficacy of endobronchial valves and the need for further studies to identify their potential role in the treatment of other pulmonary conditions besides emphysema.

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