[PICTURES IN CLINICAL MEDICINE]

Plastic Bronchitis Associated with Influenza: An Adult Case

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Key words: influenza, plastic bronchitis, adult

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Picture 1.

Picture 2.

Picture 3.

Hematoxylin and Eosin, $\times 400$

Picture 4.

A 74-year-old woman with multiple myeloma who complained of high fever was diagnosed with influenza A and immediately treated with laninamivir. Ten hours later, she developed dyspnea with bilateral wheezing, which progressed to type-2 respiratory failure. Chest radiography re-

vealed atelectasis and computed tomography showed obstruction (arrow) (Picture 1, 2). A histological analysis of the bronchial tree-shaped mucus plugs removed by bronchoscopy confirmed abundant fibrinous and mucinous material with blood cell infiltration, indicating plastic bronchitis (PB)

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(Picture 3, 4), which was not caused by an allergy or another disease. The influenza virus infection lasted for two weeks and was associated with the respiratory symptoms. PB was considered to be associated with severe influenza virus infection due to the patient's advanced age and immunocompromised status. PB is rarely associated with influenza virus infection, and mainly occurs during childhood (1, 2). PB should also be considered in adults if lung atelectasis develops after influenza virus infection.

The authors state that they have no Conflict of Interest (COI).

References

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