A Case of Colobronchial Fistula Causing Foul-smelling Sputum with a Fecal Odor

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Key words: stomach neoplasms, foul-smelling sputum, colobrochial fistula

A 73-year-old woman presented with a one-week history of productive cough with foul-smelling sputum with a fecal odor. Three months before the onset of the symptom, she had been diagnosed with gastric cancer involving the pancreas and descending colon. Unfortunately, chemotherapy achieved no response. Computed tomography (CT) revealed a direct connection between the left lower bronchi and the descending colon with consolidation in the left lower lobe without a subdiaphragmatic abscess, suggesting invasive cancerous lesions (Picture A and B). Sputum cultures grew Escherichia coli, and the cause of the malodor was confirmed to be colobronchial fistula (CBF). CBF is a rare complication that is most frequently associated with Crohn’s disease. It is also seen in cases of infection, postoperative adhesion and malignancy (1). Barium enema and CT are useful for its diagnosis. Management usually requires surgery and infection control (2); however, she did not undergo further examinations, including colonoscopy and barium enema, and declined surgery because of her poor performance status. She was treated with antibiotics and intravenous infusion without taking anything through the oral route. The patient died within one week.

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

References
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Received: May 12, 2017; Accepted: July 3, 2017; Advance Publication by J-STAGE: November 20, 2017
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