



# Medical thoracoscopy: effective, cheap and safe for empyema

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I read with interest the article “Empyema after image-guided percutaneous intercostal drainage of subdiaphragmatic collection: a case series” by Zwicky *et al.* (1). I would like to highlight a point regarding management of empyema.

In this case series all the patients were managed surgically—either open thoracotomy or VATS (video assisted thoracoscopic surgery). But sonographic grade II patients have been shown to be effectively managed with medical thoracoscopy (2,3). Also a systematic review concluded that Medical thoracoscopy is an effective tool for empyema management and success rates can be further potentiated by post thoracoscopic intrapleural fibrinolytics (4).

Advantage of medical thoracoscopy is that it can be performed under local anesthesia or conscious sedation hence the general anesthesia (GA) risk is avoided and that it can be an option even for a patient not fit for GA and surgery. Also, other advantages are shorter recovery period and duration of hospital stay; lesser post-operative pain; less expensive compared to surgery (5).

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