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EXPERIENCE IN THE SURGICAL TREATMENT OF PULMONARY ECHINOCOCCOSIS IN CHILDREN

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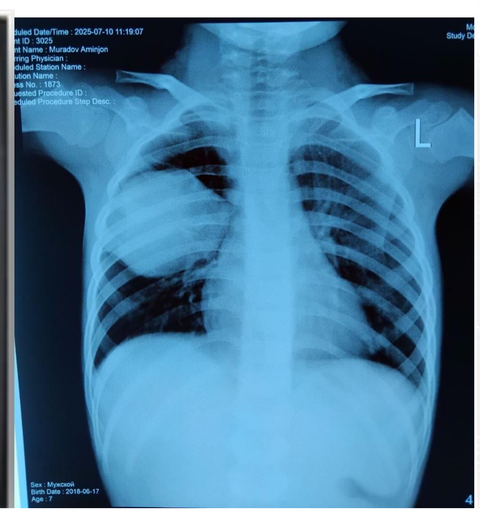
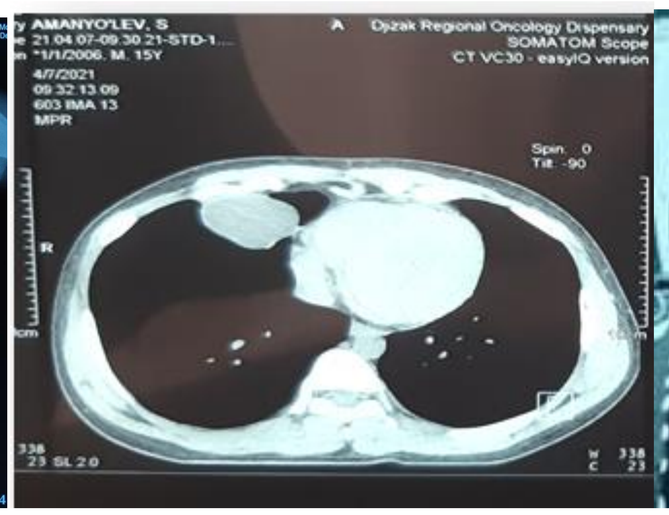
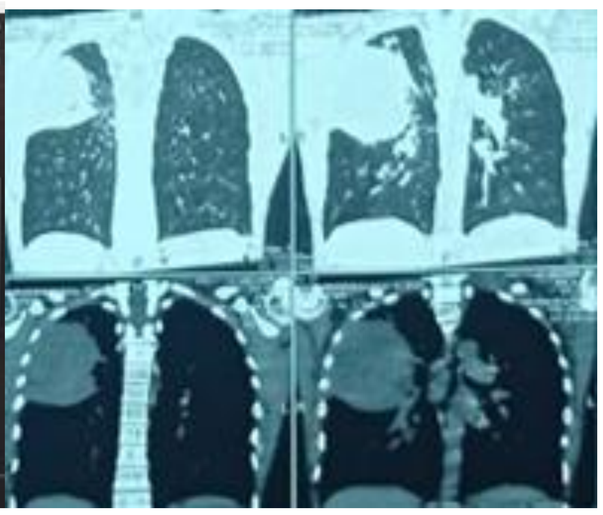
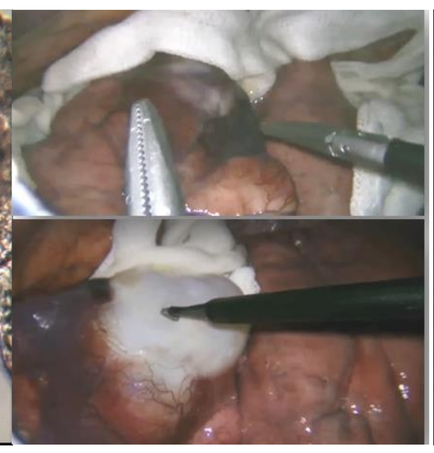
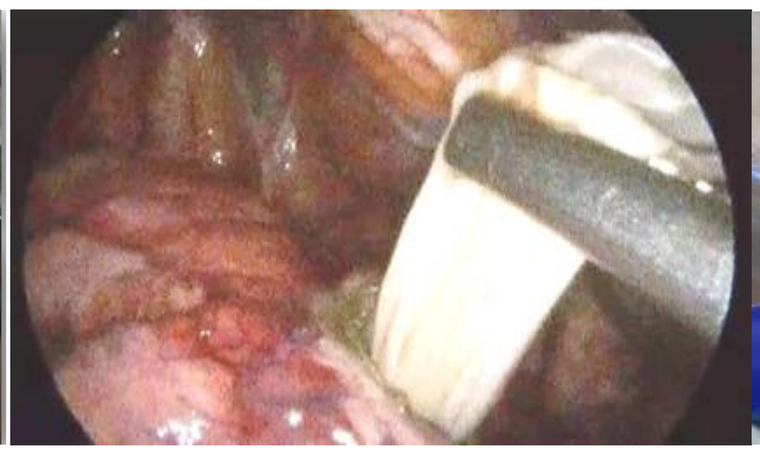
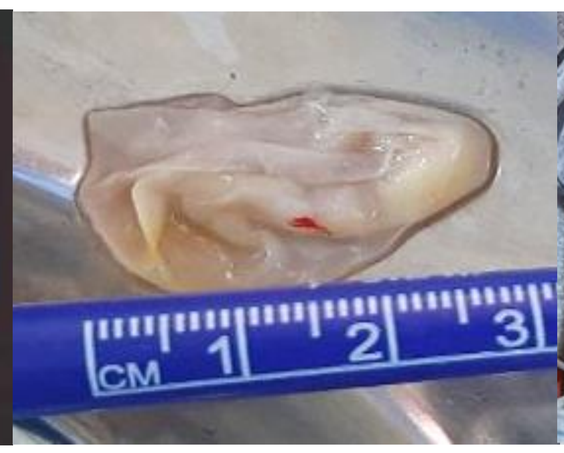
Purpose: To evaluate the effectiveness of video-assisted thoracoscopic echinococcectomy in children with pulmonary echinococcosis.

Methods: We conducted a retrospective analysis of 36 pediatric patients with pulmonary echinococcosis between 2018 and 2024. The cohort included 22 (61.1%) males and 14 (38.9%) females. Hydatid cysts were localized in the right lung in 19 (52.8%) cases, in the left lung in 9 (25.0%), bilateral involvement was observed in 5 (13.9%) cases, and combined lung and liver lesions were found in 2 (5.6%) patients. In 1 (2.8%) case, echinococcal cysts were present in the lungs, liver, and abdominal cavity. Diagnosis was based on clinical, physical, and laboratory findings, with ultrasound and radiographic imaging proving most informative in all cases.



Results: All patients underwent thoracoscopic echinococcectomy using a thoracoscope and two trocars. Intraoperatively, the residual cavity was treated with glycerin heated to 30°C, with an exposure time of up to 3 minutes. Postoperatively, all patients received three courses of albendazole-based chemotherapy. The average hospital stay was 8 days.




Conclusion: Timely diagnosis combined with video-assisted thoracoscopic echinococcectomy and postoperative chemotherapy with albendazole provides effective treatment for pulmonary echinococcosis in children. This approach enables high-quality surgical care, shortens operative time, minimizes pre- and postoperative complications, reduces postoperative pain, ensures better cosmetic outcomes, and lowers recurrence rates.