

## 5.24 Pneumothorax management in a tertiary centre in Ireland

<sup>1</sup>Hannah McKay, <sup>1</sup>Syed Farrukh Raza, <sup>1</sup>Eimear Foley, <sup>1</sup>Deirdre Fitzgerald

<sup>1</sup>Tallaght University Hospital, Dublin, Ireland

**Background:** Conservative management of primary spontaneous pneumothorax (PSP) is successful in 85% of patients in a selected population and may reduce the risk of PTx recurrence at 12 months (1).

**Methods:** All pneumothorax identified on chest x-ray in patients attending the emergency department from January 2021 to May 2022 were identified by screening radiology reports. Medical charts were reviewed to assess management of PSP.

**Results:** Of 66 pneumothorax identified, 22 were PSP. Four conservatively managed patients (n=7) were admitted for a median [IQR] of 2 [2 – 2.5] days. All had <20% (Collin's method) pneumothorax, median [IQR] 11.25% [9.1 – 13.4]. None of those conservatively managed required an acute intervention. All others underwent a procedure (seldinger, n = 12, needle aspiration n = 1, surgery n = 2). One patient had clinical signs of tension but all others had stable vital signs at presentation. LOS was median [IQR] 4 [2 – 9] days for those admitted and PSP accounted for 104 hospital bed days.

**Conclusion:** Development of PSP management pathways in the ED with appropriate pleural service follow-up may reduce the rate of procedural intervention and hospital days. **Conflict of Interest:** The authors declare that they have no conflict of interest