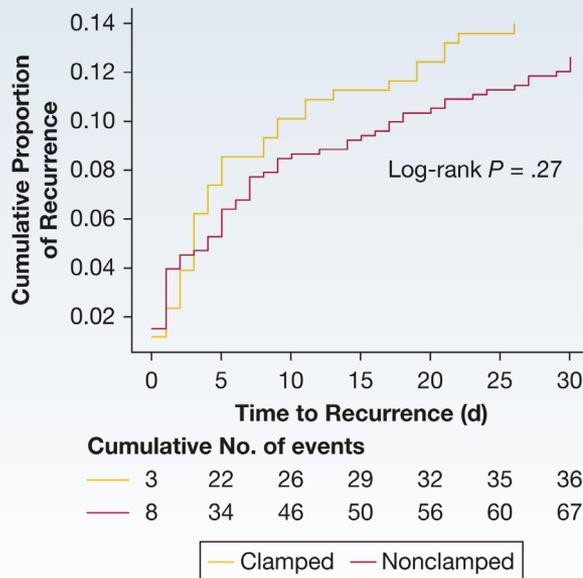


Do Intercostal Chest Drain Removal Strategies Impact the Risk of Pneumothorax Recurrence?

STUDY DESIGN

- **Multicenter retrospective** analysis of patients (n = 791) requiring **intercostal chest drain insertion for spontaneous pneumothorax**
- **13%** experienced pneumothorax **recurrence** (at 30 days)
- **32.6%** underwent **clamping trials**

RESULTS



Recurrence of pneumothorax was not significantly different between clamped vs nonclamped groups

- Median length of stay was 6 (clamped) vs 5 (nonclamped) days

Adverse events in clamping were few (n = 6) but included tension pneumothorax (n = 1)

Digital air leak + clamping (n = 24) resulted in the lowest rates of pneumothorax recurrence, but this approach was rare

The findings of this study indicate that recurrent pneumothorax after intercostal device removal is common, but there was no significant difference in pneumothorax recurrence at 7 or 30 days between the clamped and nonclamped groups.