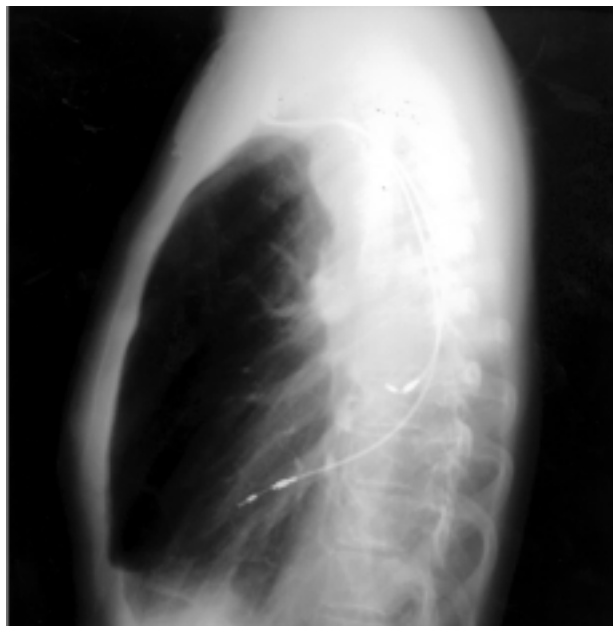


## Images in Cardiology: Anatomic Consequences of Right Pneumonectomy

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A 43-year-old woman underwent right pneumonectomy seven years previously for lung cancer. Five years postoperatively the patient developed frequent prolonged paroxysms of symptomatic atrial fibrillation with rapid ventricular response uncontrolled by medicine. One year ago she underwent atrioventricular nodal ablation with successful uncomplicated installation of a dual chamber mode-switching pacemaker for control of her symptoms. The figure shows the radiographic position of the pacemaker leads and documents the dramatic



rotation and shifting of the mediastinal structures as a result of removal of the right lung. The patient is now free of any symptoms during periods of atrial fibrillation.

### Reference

Tronc F, Gregoire J, Leblanc P, Deslauriers J: Physiological consequences of pneumonectomy: Consequences on the pulmonary function. *Chest Surg Clin North Am* 1999;9:459-473