Bronchocutaneous fistula from metastatic cervical cancer with COVID-19

Ross Harrison, Pedro T Ramirez

DESCRIPTION

A 38-year-old woman with a history of stage IVA squamous cell cancer of the cervix presented with pain and an enlarging wound in her central chest. Approximately 20 months earlier the patient developed a cavitary right lung mass that invaded the anterior chest wall. A biopsy of the mass showed squamous cell carcinoma. Despite treatment with radiation and chemotherapy, the mass grew, developing into an open wound. On chest computed tomography, a cavitary mass in the right middle lobe of the lung was found invading through the anterior chest wall (Figure 1). A branch of the right bronchial tree opened into the tumor cavity which also opened anteriorly through the defect in her chest wall (Figure 2). The patient was admitted for pain control. Asymptomatic screening at hospital admission using polymerase chain reaction detected evidence of COVID-19. She was discharged to home hospice.

Figure 1 Representative image from computed chest scan with arrows highlighting communication between the secondary bronchus, pleural space, and external environment.

Figure 2 Clinical appearance of chest wound.