Flip-Flop Lung An Unusual Etiology of Bronchiectasis

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Figure 1.

A 14-year-old female presented to a pulmonary clinic with a 1-year history of recurrent right lower lobe pneumonia. Spirometry, immunologic, rheumatologic, cystic fibrosis, primary ciliary dyskinesia, and fungal assessments were unrevealing. Bronchoscopy showed right lower lobe pus that was not cleared by the procedure (Figure 1A). Bronchoalveolar lavage revealed 237,390,000 white blood cells (97% neutrophils) and grew *Streptococcus anginosus*. Initial computed tomography scan revealed right lower lobe airspace disease with fluid-filled bronchiectasis (Figure 1B). After prolonged treatment with amoxicillin/clavulanate, dornase alfa, and airway clearance, the fluid resolved, unveiling saccular bronchiectasis (Figure 1C). Gross pathology after right lower lobe resection confirmed saccular bronchiectasis (Figure 1D, *filled arrow*), and revealed a crumpled plastic tag labeled “ladies flip flop USA size 5–6” (Figure 1D, *open arrow*; Figure 1E). Afterwards, her mother recalled that she “used to chew on stuff.” The patient remembered wearing the sandals 4 years prior, but had no recollection of aspirating the tag. ■

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