ALGORITHM OF MANAGEMENT OF CHYLOTHORAX

Suspected Chylothorax: If milky drain noticed - observe for 24 hours - if pleural drain increasing

Confirm Diagnosis

Pleural Fluid Analysis: Triglyceride level > 1.1 mmol per litre, absolute cell count > 1000 cells per ml, lymphocyte fraction > 80% (Buttiker et al 1999)

Is enteral feeding contraindicated – gastrointestinal problems, malabsorption, severe fluid restriction, poor nutritional status with high protein loss

MONOGEN AND/OR MINIMAL LCT DIET 5 DAY TRIAL

Monitor pleural drainage in mL/kg/day
Replace to maintain serum albumin > 30g/L

MONOGEN OR MINIMAL LCT DIET

Drain decreasing and < 20mL/kg/day on Day 5
Continue Monogen or minimal LCT diet

Drain not decreasing or > 20mL/kg/day on Day 5
Investigate residual lesion with echo ± catheter study

PARENTERAL NUTRITION

Drain not decreasing or > 20mL/kg/day on Day 5
Investigate residual lesion with echo ± catheter study

Drain decreasing and < 20mL/kg/day on Day 5

Is pleural drain < 10mL/kg/day

YES
Review nutritional status with clinical dietitian
If poor oral intake, pleural drain > 20mL/kg/day or weight loss - Consider 7 days parenteral nutrition

NO

Thoracic Duct Ligation especially if draining > 100mL/kg/day or longer than 3 weeks

YES

Surgery for Residual Lesion

NO

Parenteral Nutrition

If pleural drain volume < 5mL/kg/day

Monogen or minimal LCT fat diet
Continue diet for 4 weeks from day last drain removed