

The 38<sup>th</sup> KTCVS  
Spring Meeting  
2024 SEOUL



The 4<sup>th</sup> AAPCHS

May 31st - June 1st  
Seoul Dragon City Hotel

# Epidemiology of Spontaneous Pneumothorax

: The Real World

장효준



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# Introduction

# Definition

- Pneumothorax : presence of air in the pleural space
  1. Communication between alveolar and pleura space
  2. Communication between atmosphere and pleura space
  3. Presence of gas-producing organisms

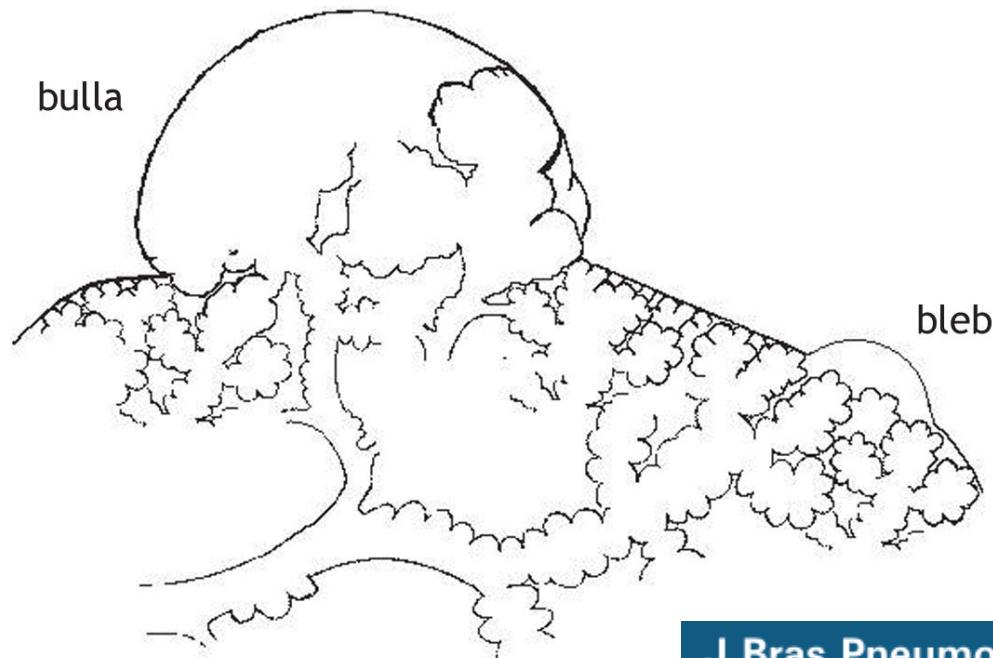
# Classification

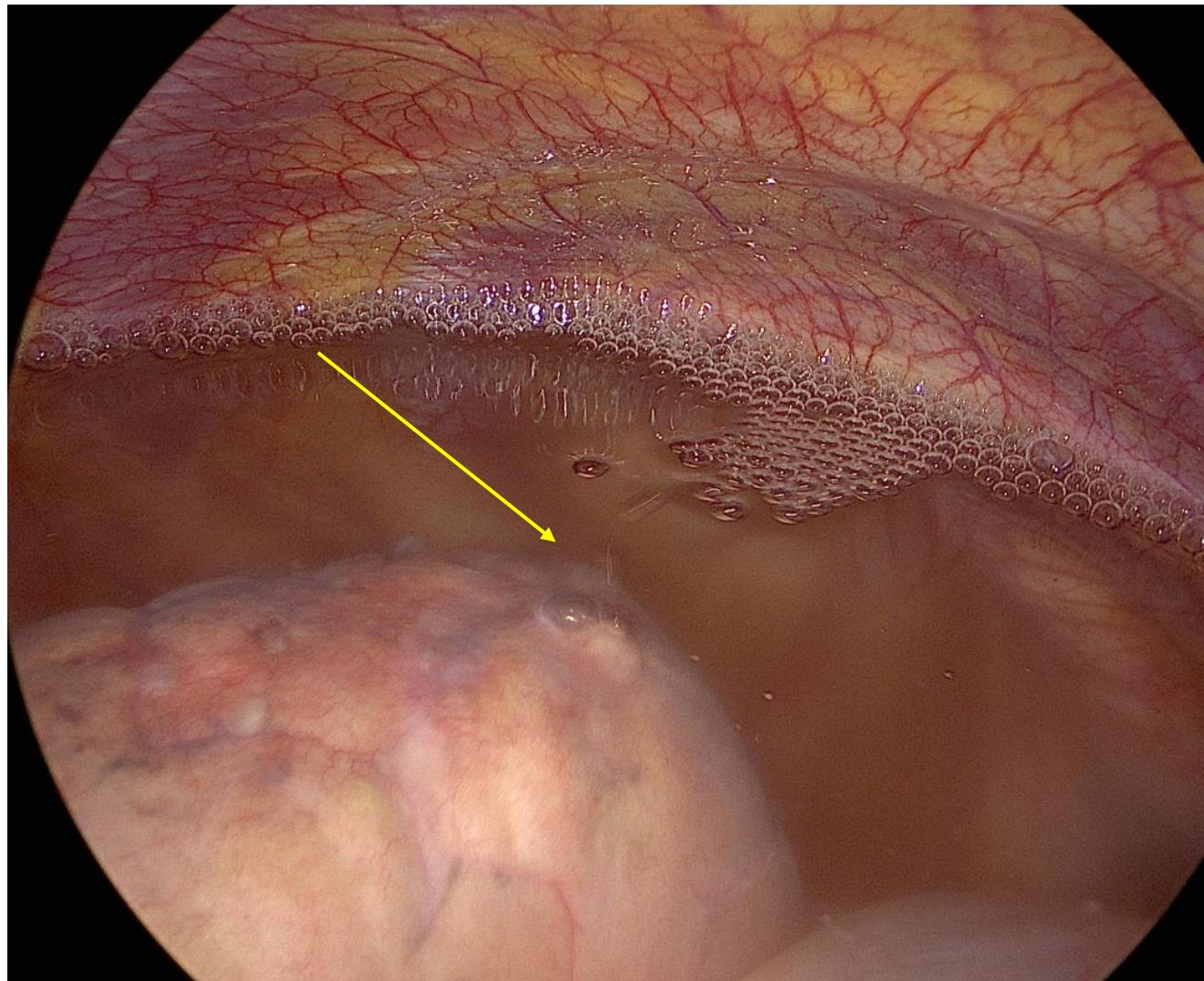
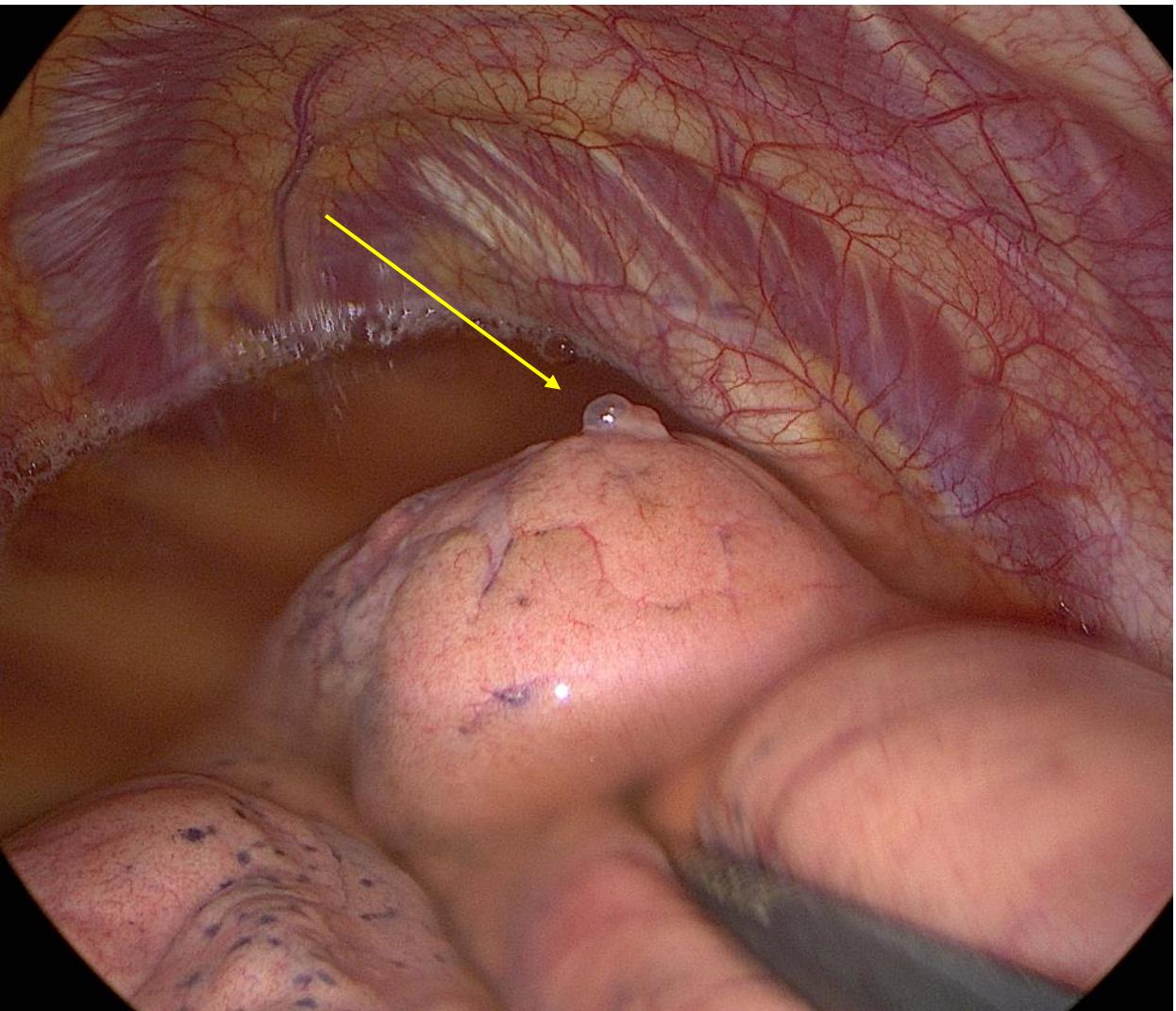
- Spontaneous
  - ✓ Primary : with no apparent underlying lung disease
  - ✓ Secondary : with apparent underlying lung disease
    - Catamenial
    - Neonatal
- Traumatic
  - ✓ Iatrogenic/noniatrogenic

# Primary Spontaneous Pneumothorax (PSP)

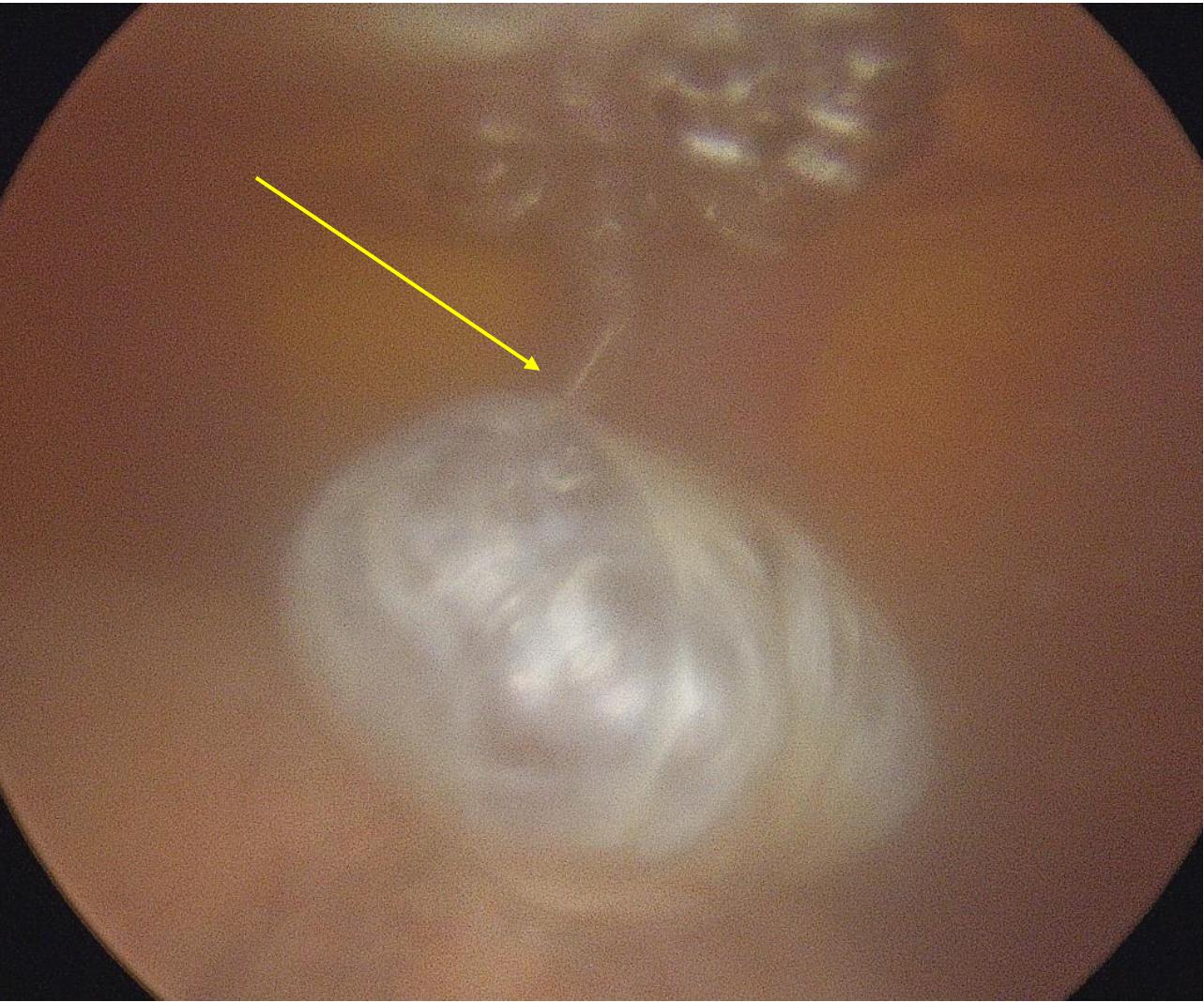
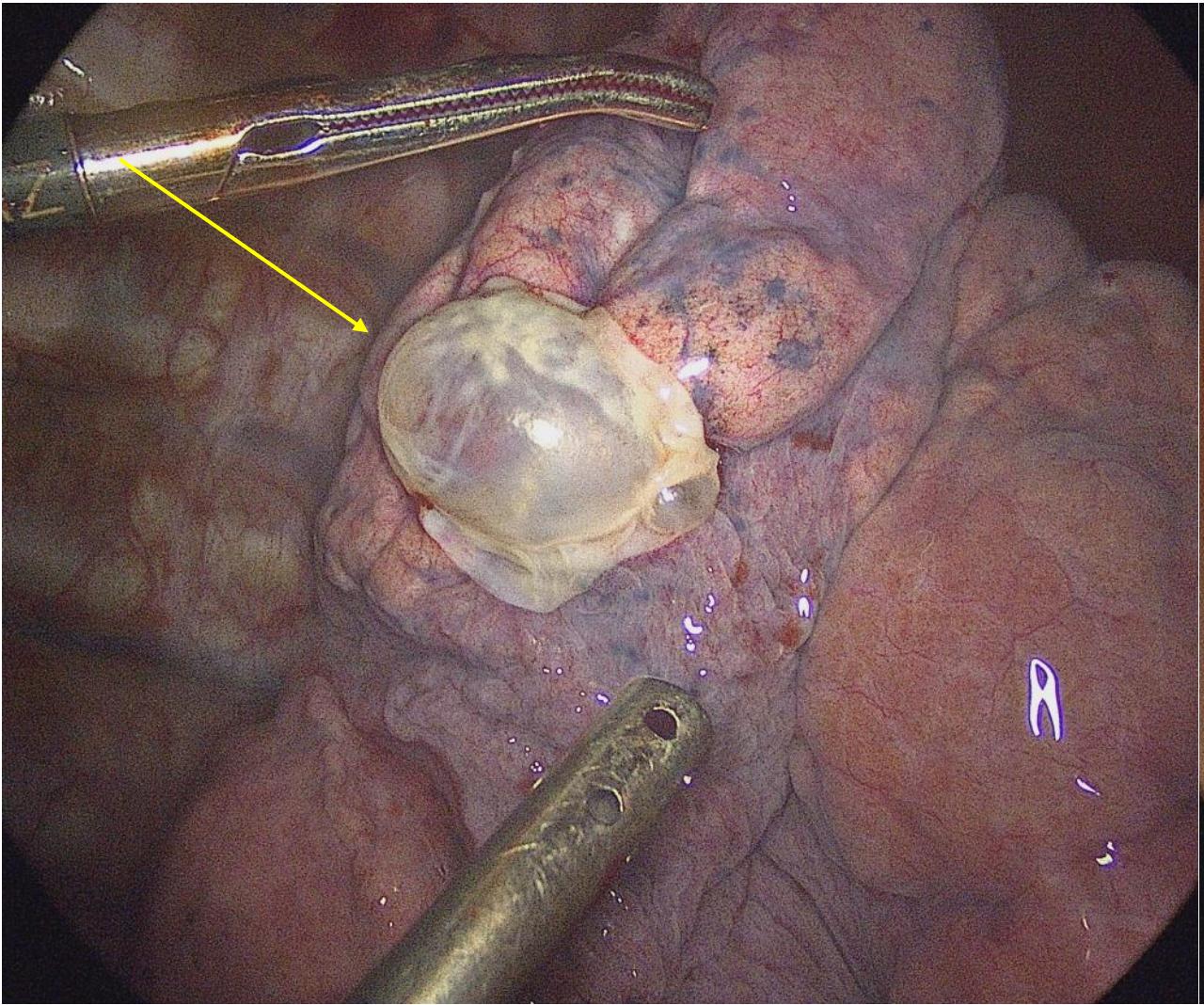
- Spontaneous rupture of subpleura bleb or bullae
  - ✓ 3.6%~73% seen during operation

(Noppen M. *Curr Opin Pulm Med* 2003;9(4):272-5.)





Male, 17 years old



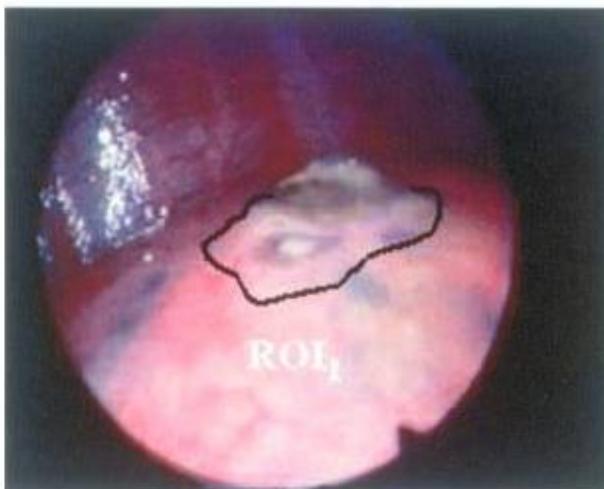
Male, 34 years old

# Primary Spontaneous Pneumothorax (PSP)

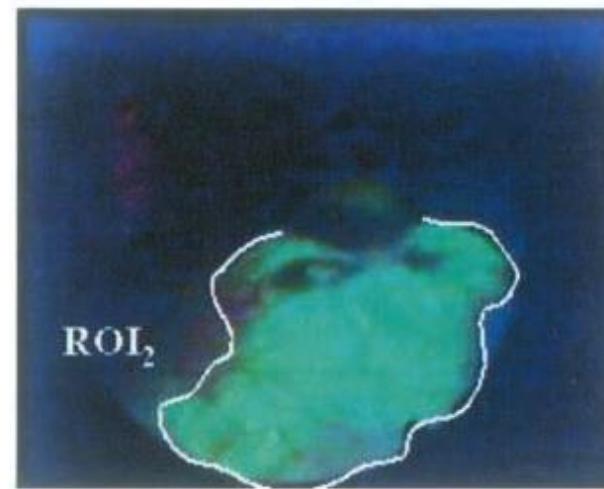
- Pleural porosity
  - ✓ disruption of mesothelial cell → inflammatory elastofibrotic layer → increased porosity

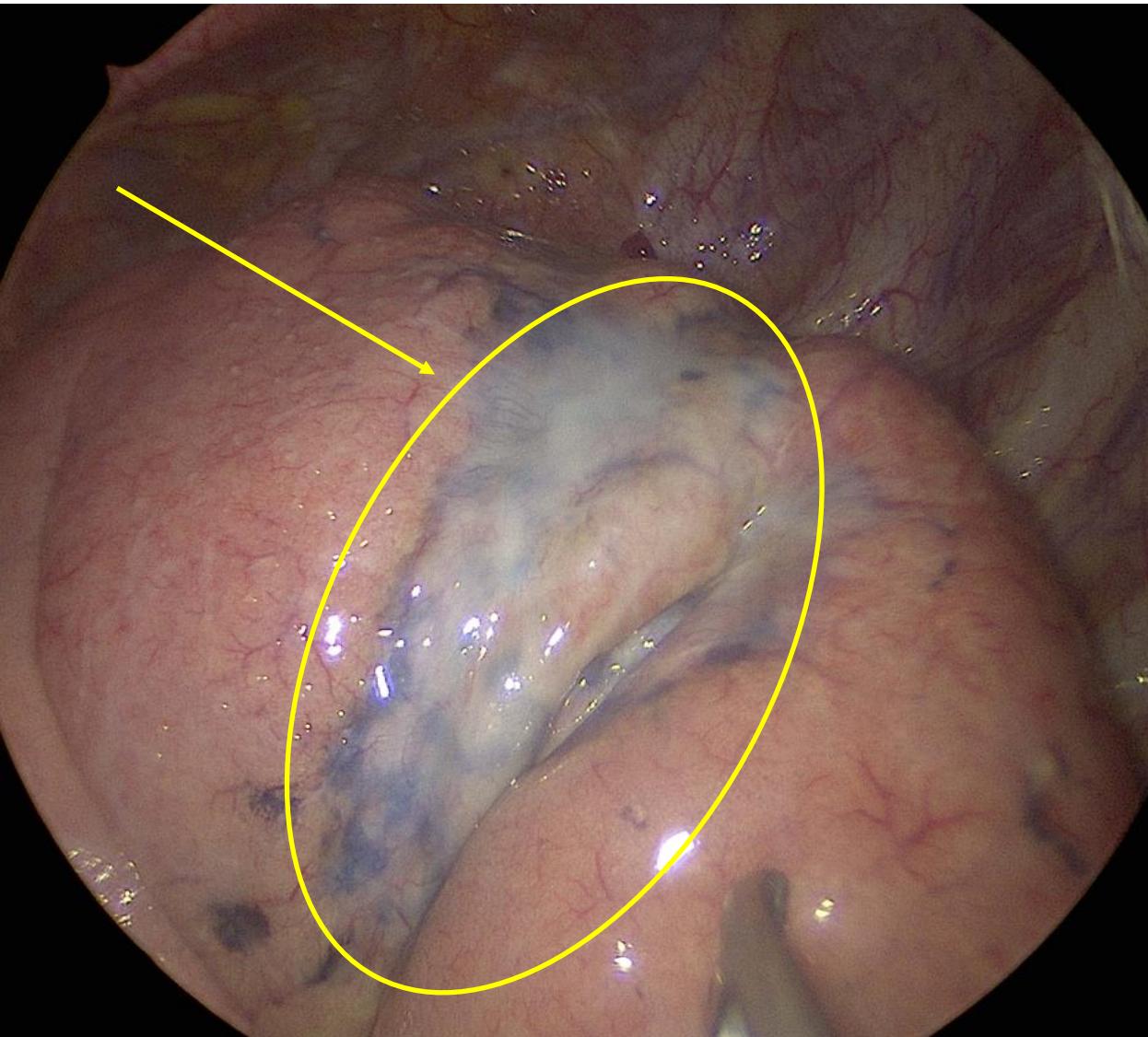
(Noppen M. *Am J Respir Crit Med.* 2006;26-30.)

A

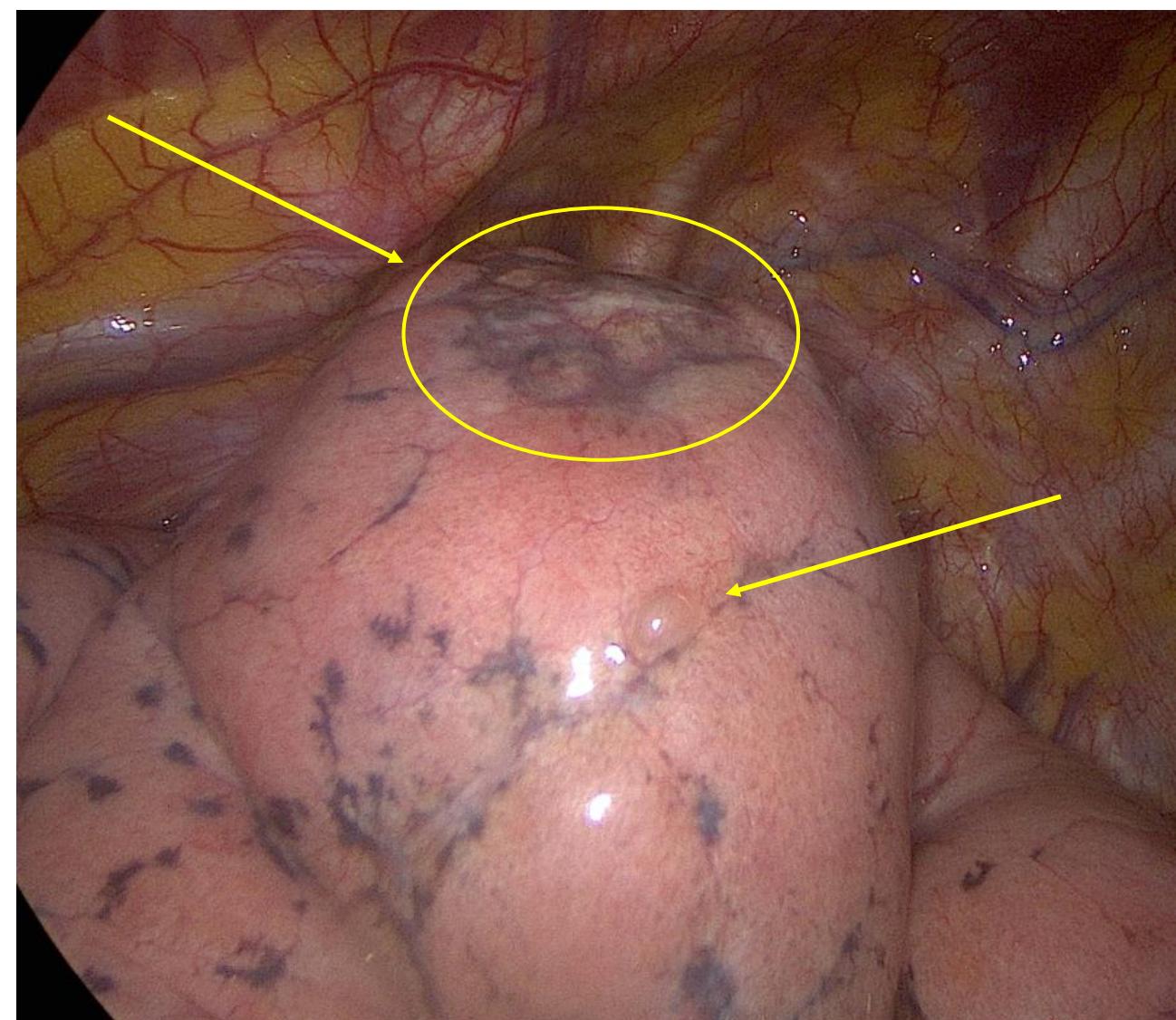


B





Male, 19 years old



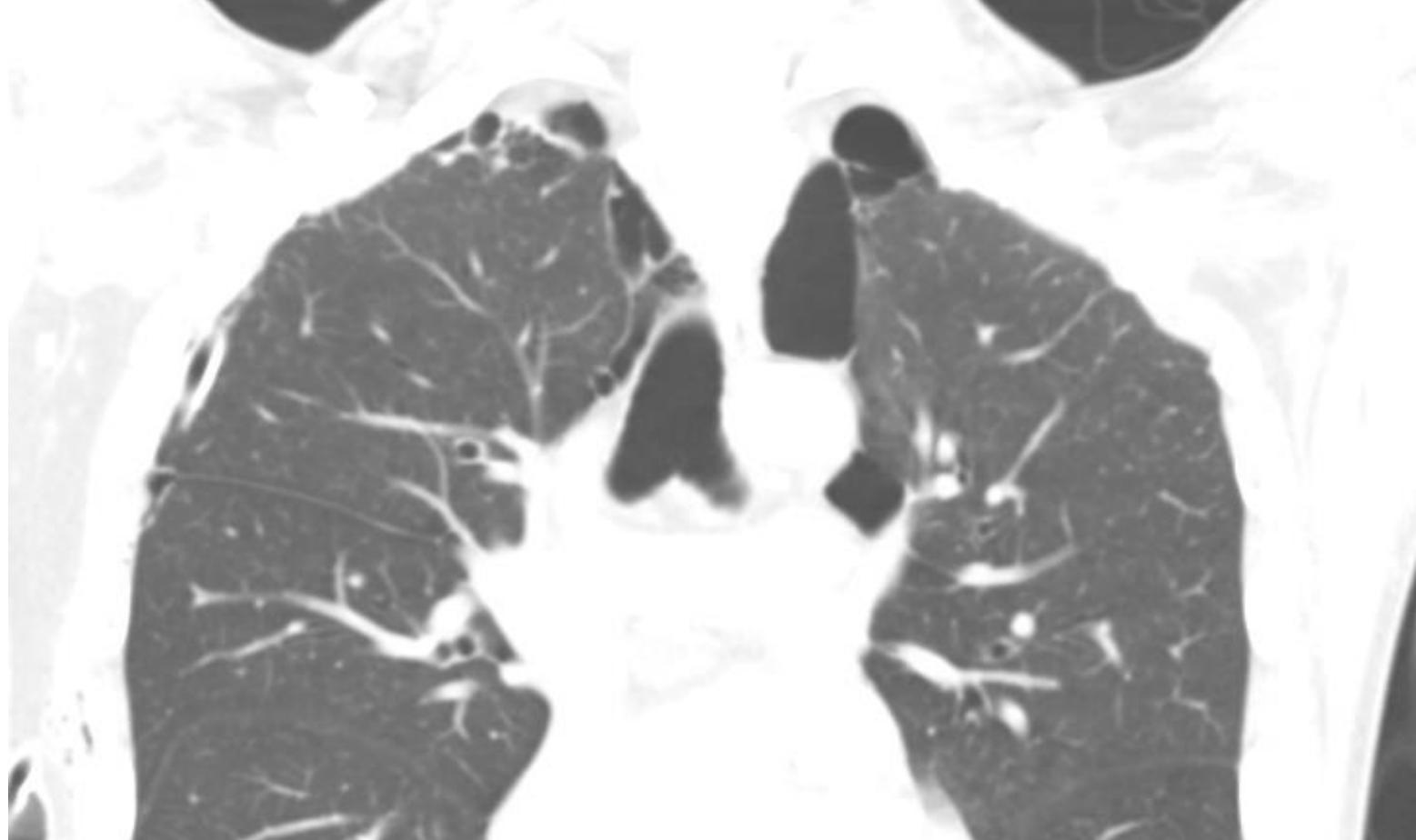
Male, 24 years old

# Risk factor of PSP

- Younger age
- Male gender
- Thin, tall, lower BMI
- Smoking
- Air pollution...

# Secondary Spontaneous Pneumothorax (SSP)

- Chronic obstructive pulmonary disease
- Tuberculosis
- Diffuse cystic lung disease
  - ✓ Lymphangioleiomyomatosis
  - ✓ Pulmonary Langerhans cell histiocytosis
  - ✓ Birt-Hogg-Dube syndrome
  - ✓ Lymphophytic interstitial pneumonia
- Pulmonary infection
  - ✓ Bacterial pneumonia
  - ✓ *Pneumocystis jirovecii* pneumonia
  - ✓ Covid-19 pneumonia
- Others
  - ✓ Cancer
  - ✓ Sarcoidosis
  - ✓ Interstitial lung disease



**Multiple diffuse bullae?**  
**PSP?**

**Paraseptal emphysema?**  
**SSP?**

Male, 32 years old, Smoker

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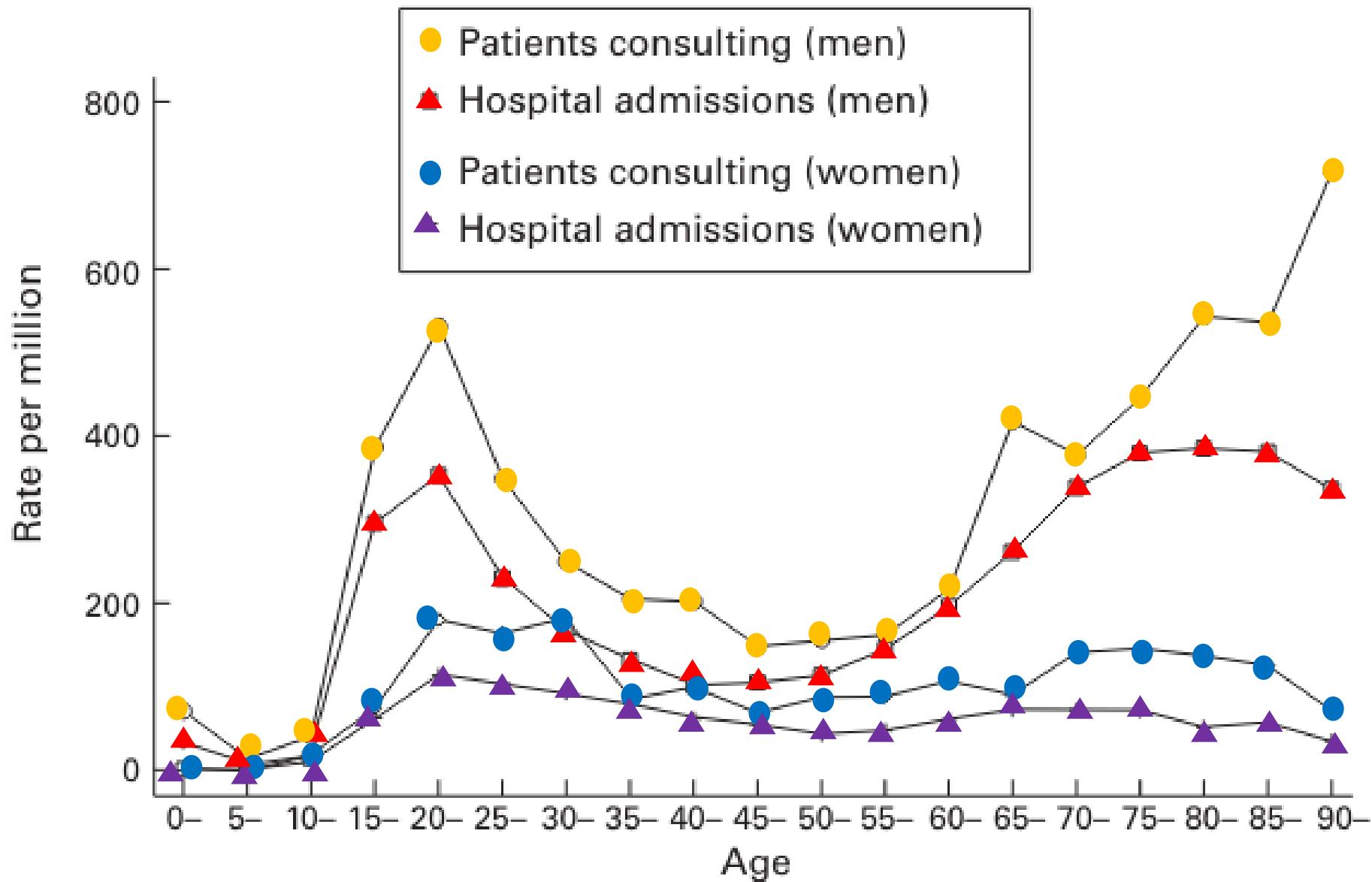
# Explore of Epidemiologic Studies

# Epidemiology of pneumothorax in England

Dheeraj Gupta, Anna Hansell, Tom Nichols, Trinh Duong, Jon G Ayres, David Strachan

*Thorax* 2000;55:666–671

- The first large scale epidemiologic study
- 1991-1995
- N=22,749 → spontaneous pneumothorax
- GP consultation, ER admission



**Incidence of SP**  
Men : 24.0/100,000  
Women : 9.8/100,000

# Trends in the Incidence and Recurrence of Inpatient-Treated Spontaneous Pneumothorax, 1968-2016

Rob J. Hallifax, PhD; Raph Goldacre, MSc; Martin J. Landray, PhD; Najib M. Rahman, PhD; Michael J. Goldacre, MD

JAMA. 2018;320(14):1471-1480. doi:10.1001/jama.2018.14299

- 1968-2016, N=170,929 → incidence trend
- 2015, N=6372 → PSP, SSP
- Hospital admission

**Figure 4. Age-Standardized Hospitalization Rates for Spontaneous Pneumothorax in England (National Data; Record-Linked From 1999 only) and ORLS (Regional Data; Record-Linked From 1968) by Sex**

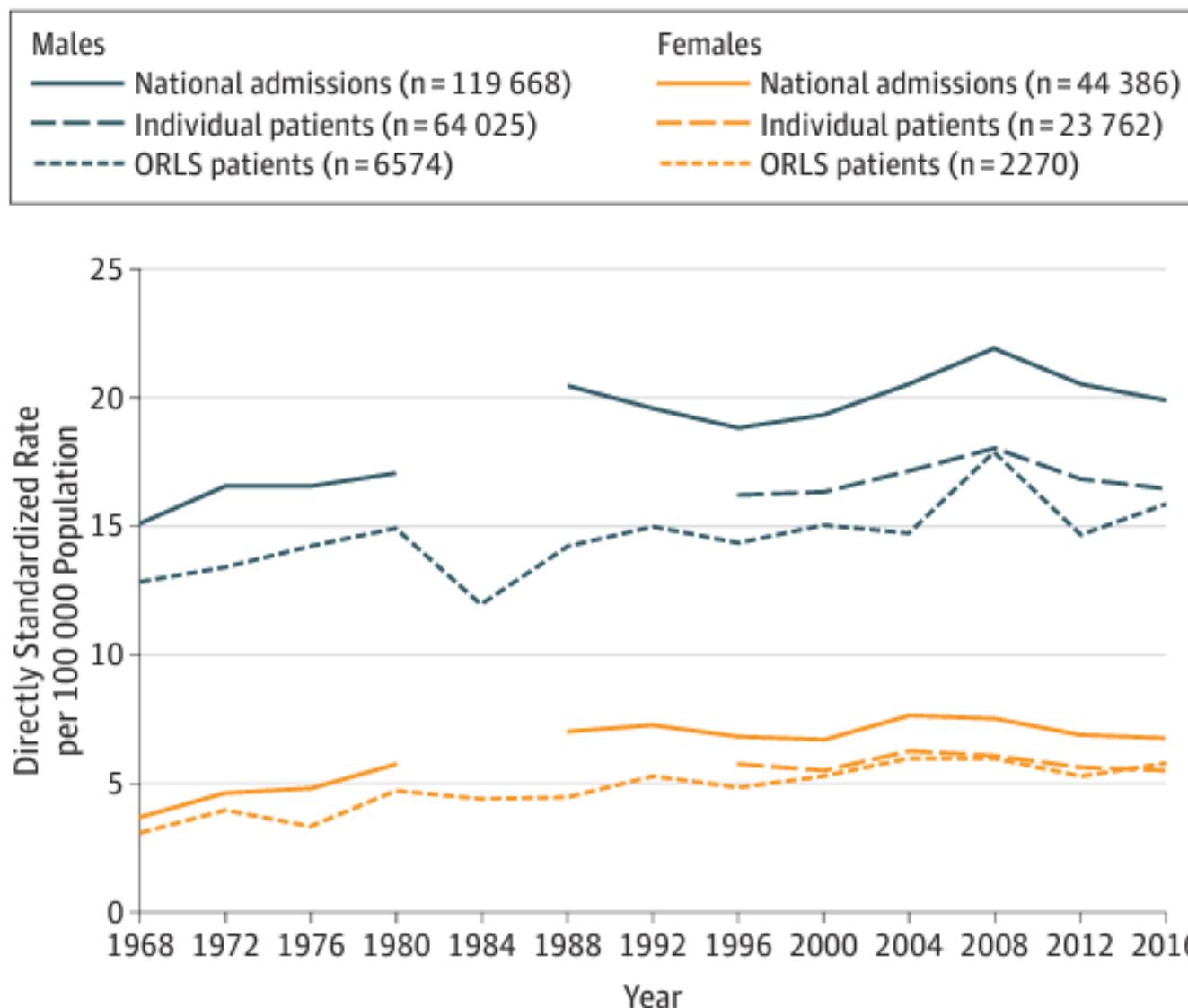
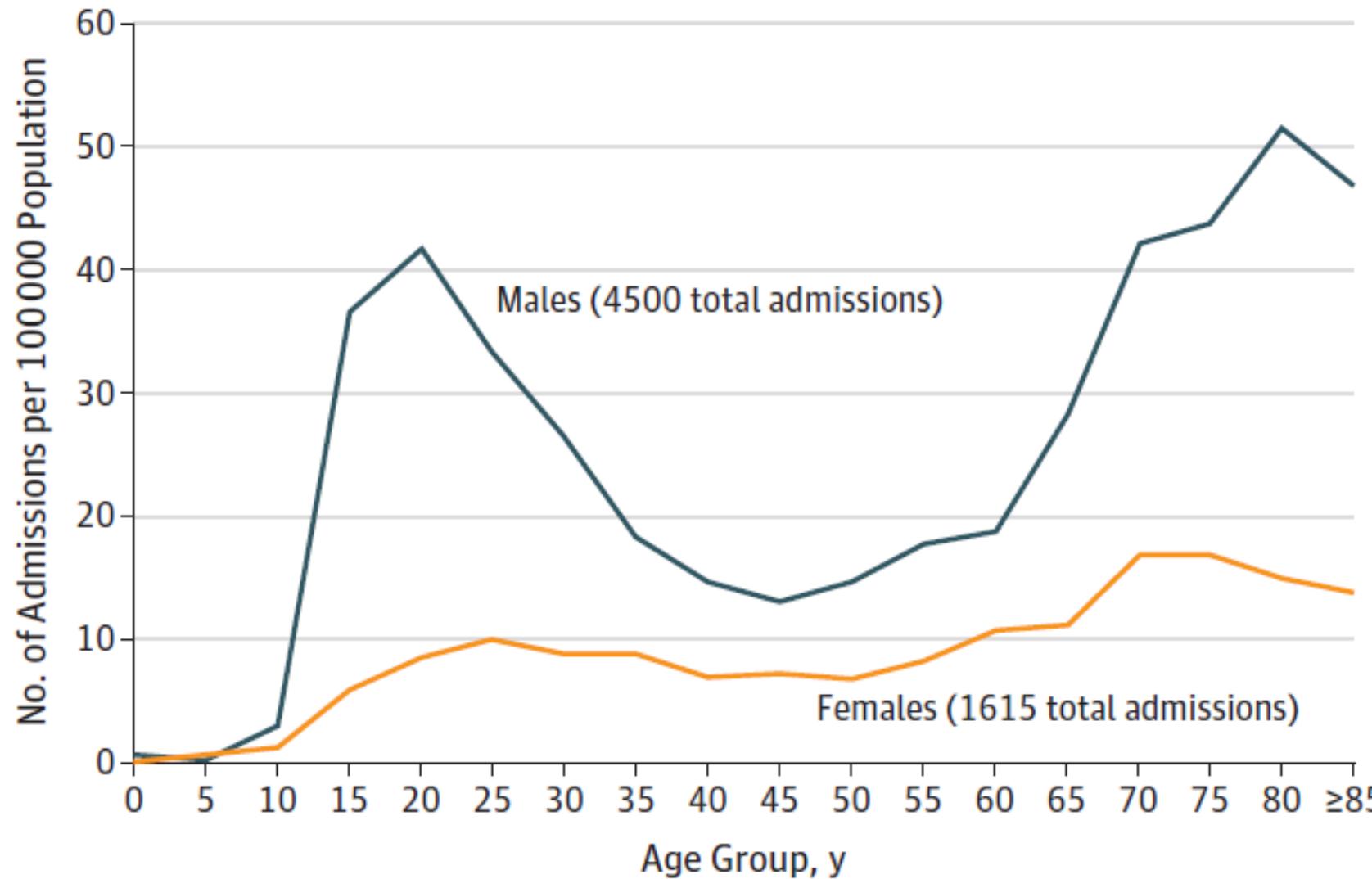


Figure 2. Spontaneous Pneumothorax Admissions by Age-Specific Population in England, 2015

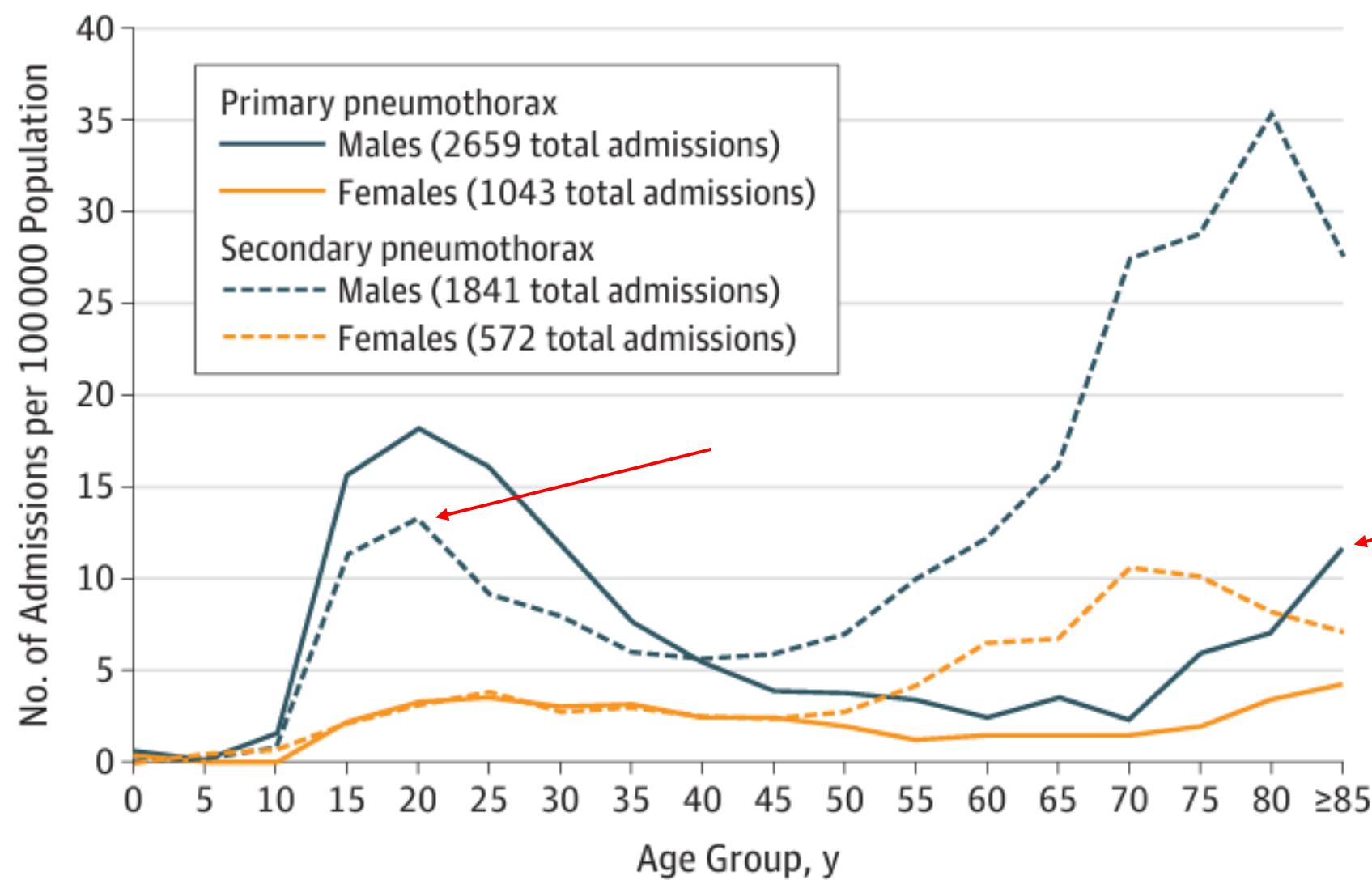


The ratio of male:female  
=> 2.8:1

Table 2. Percentage Distribution of Comorbidities Among Secondary Spontaneous Pneumothorax Admissions, England 2015

Secondary Pneumothorax Admissions (% of Total) <sup>a</sup>	Distribution of Respiratory Comorbidities, % <sup>b</sup>							
	COPD/ Emphysema	Asthma	Interstitial Lung Disease	Malignancy	Tuberculosis	Sarcoidosis	Cystic Fibrosis	
<b>Male, by Age Group, y</b>								
15-34	754 (40.3)	71.9	41.2	6.6	0.1	0.8	0.8	1.2
35-49	320 (51.2)	74.1	40.6	10.0	3.1	0.6	2.2	0.9
50-64	468 (74.4)	84.2	31.4	10.7	13.0	2.6	0.9	0.0
≥65	1101 (83.3)	87.6	28.2	22.2	16.3	0.6	0.6	0.2
Overall	2643 (59.4)	80.9	34.0	14.2	9.5	1.0	0.9	0.5
<b>Female, by Age Group, y</b>								
15-34	211 (49.4)	53.6	55.0	6.6	1.9	2.8	0.0	0.9
35-49	145 (49.5)	57.2	51.0	6.9	12.4	0.0	0.0	0.0
50-64	219 (73.5)	84.5	35.6	9.6	17.8	0.0	0.5	0.0
≥65	451 (78.8)	79.4	38.6	18.6	24.8	1.8	1.3	0.0
Overall	1026 (64.5)	72.0	43.1	12.6	16.9	1.4	0.7	0.2

**Figure 3. Primary and Secondary Spontaneous Pneumothorax Admissions by Age-Specific Population And Sex in England, 2015**



The ratio of male:female  
PSP → 2.5:1  
SSP → 3.2:1

# Epidemiology of spontaneous pneumothorax: gender-related differences

Antonio Bobbio,<sup>1</sup> Agnès Dechartres,<sup>2,3,4</sup> Samir Bouam,<sup>5</sup> Diane Damotte,<sup>4,6</sup>  
Antoine Rabbat,<sup>7</sup> Jean-François Régnard,<sup>1,4</sup> Nicolas Roche,<sup>4,7</sup> Marco Alifano<sup>1,4</sup>

Bobbio A, et al. *Thorax* 2015;70:653–658.

- 2008-2011
- Hospital admission → 59,637
- N=42,595
- PSP, SSP

# Tabular List of Diseases: J93.12

## Legend



## CHAPTER 10: Diseases of the respiratory system (J00-J99)

Other diseases of the pleura (J90-J94)

J93 Pneumothorax and air leak

**J93.0 Spontaneous tension pneumothorax**

J93.1 Other spontaneous pneumothorax

**J93.11 Primary spontaneous pneumothorax**

**J93.12 Secondary spontaneous pneumothorax**

J93.8 Other pneumothorax and air leak

**J93.81 Chronic pneumothorax**

**J93.82 Other air leak**

**J93.83 Other pneumothorax**

**J93.9 Pneumothorax, unspecified**

Use Code First: J93.12

### **J93.12 Secondary spontaneous pneumothorax**

- underlying condition, such as:
- catamenial pneumothorax due to endometriosis (N80.B-)
- cystic fibrosis (E84.-)
- eosinophilic pneumonia (J82.81-J82.82)
- lymphangioleiomyomatosis (J84.81)
- malignant neoplasm of bronchus and lung (C34.-)
- Marfan syndrome (Q87.4-)
- pneumonia due to *Pneumocystis carinii* (B59)
- secondary malignant neoplasm of lung (C78.0-)
- spontaneous rupture of the esophagus (K22.3)



**Table 1** Characteristics of hospitalisations for non-traumatic pneumothorax between 2008 and 2011 in France

Characteristics	N=59 637
Age (years), mean (SD)	38 (19)
Year, n (%)	
2008	14 747 (25%)
2009	15 170 (25%)
2010	14 898 (25%)
2011	14 822 (25%)
Season, n (%)	
Winter	14 927 (25%)
Spring	15 101 (25%)
Summer	14 442 (24%)
Fall	15 167 (26%)
Pneumothorax type	
Idiopathic	50 596 (85%)
Secondary	9041 (15%)
Place of hospitalisation	
Surgical ward	16 236 (27%)
Medical ward	43 401 (73%)
Intensive or intermediate care unit	16 057 (27%)
Surgical treatment	n=14 352
Thoracoscopic blebs resection with partial pleural resection or pleural abrasion	7529 (52%)
Intrapleural instillation of irritant substance	3431 (23%)
Resection of bullae by thoracotomy	2889 (20%)
Others	503 (5%)
Hospitalisation duration, mean (SD)	7.0 (9.0)

#### Pneumothorax type

Idiopathic  
Secondary

50 596 (85%)  
9041 (15%)

**Table 3** Comparison of hospitalisation characteristics between men and women stratified by age

Characteristics	Men	Women	p Value
<i>Age 18–30 years</i>	<i>N=20 669</i>	<i>N=4487</i>	
Pneumothorax type			0.95
Idiopathic	19 359 (94%)	4204 (94%)	
Secondary	1310 (6%)	283 (6%)	
Place of hospitalisation			0.33
Surgical ward	6303 (30%)	1396 (31%)	
Medical ward	14 366 (70%)	3091 (69%)	
Intensive or intermediate care unit	4773 (23%)	1045 (23%)	0.79
Surgical treatment	5700 (28%)	1235 (28%)	0.93
Hospitalisation duration, days, mean (SD)	5.4 (4.5)	5.5 (5.3)	0.06
Rehospitalisation, n (%)	10 841 (52%)	2510 (56%)	0.001

Characteristics	Men	Women	p Value
<i>Age 50–65 years</i>	<i>N=5821</i>	<i>N=1953</i>	
Pneumothorax type			<0.0001
Idiopathic	3778 (65%)	1508 (77%)	
Secondary	2043 (35%)	445 (23%)	
Place of hospitalisation			0.0001
Surgical ward	1381 (24%)	382 (20%)	
Medical ward	4440 (76%)	1571 (80%)	
Intensive or intermediate care unit	1975 (34%)	627 (32%)	0.16
Surgical treatment	1155 (20%)	326 (17%)	<0.0001
Hospitalisation duration, days, mean (SD)	10.1 (14.5)	9.5 (14.8)	<0.0001
Rehospitalisation, n (%)	2616 (45%)	747 (38%)	<0.0001

# Current situation of management of spontaneous pneumothorax in Japan: A cross-sectional cohort study<sup>☆</sup>

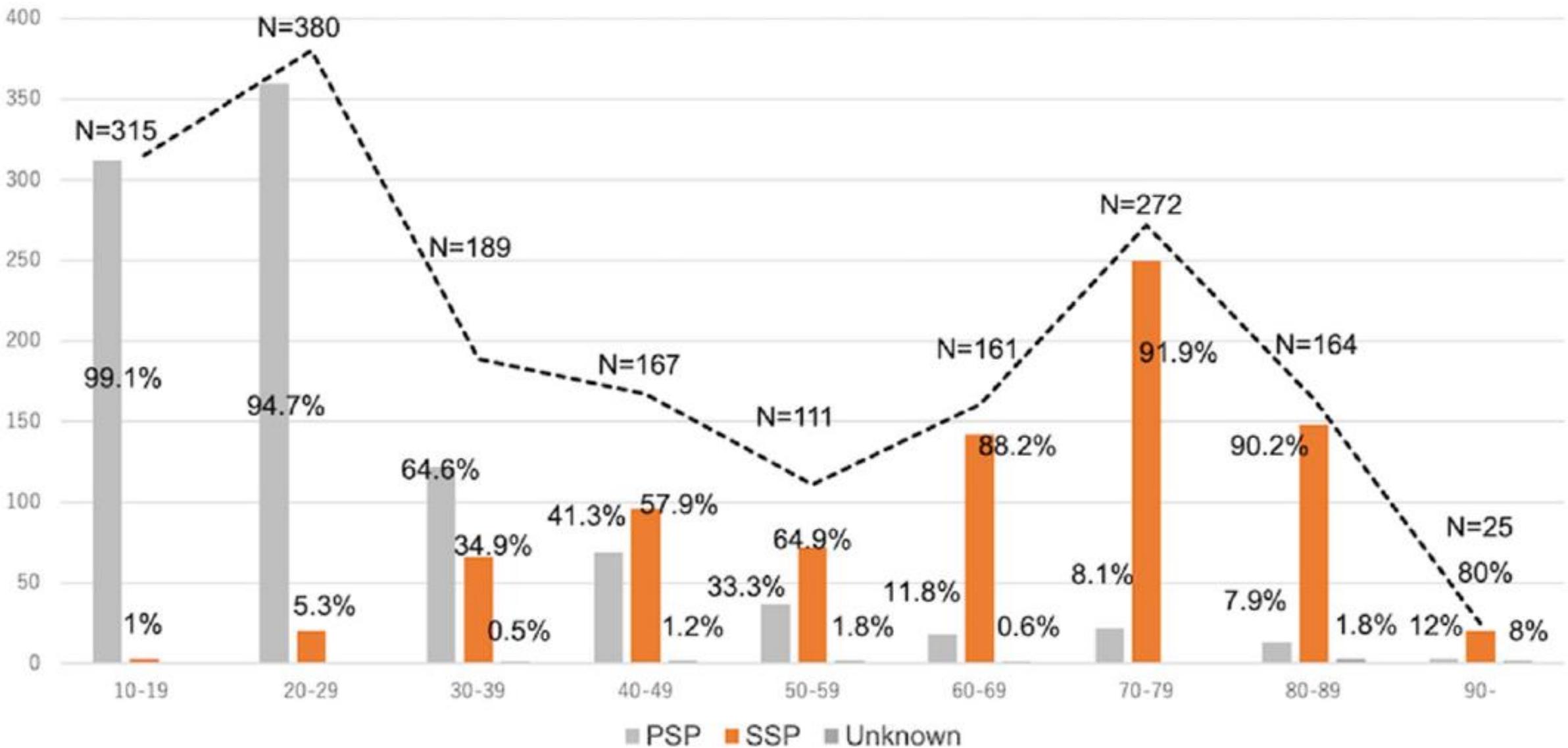
Hitoshi Igai <sup>a,\*</sup>, Noriyoshi Sawabata <sup>b</sup>, Toshiro Obuchi <sup>c</sup>, Noriyuki Matsutani <sup>d</sup>,  
Kenji Tsuboshima <sup>e</sup>, Shouichi Okamoto <sup>f</sup>, Akihiro Hayashi <sup>g</sup>

Respiratory Investigation 62 (2024) 328–333

- The Japan Society for Pneumothorax and Cystic Lung Disease (JSPCLD)
- April 2019–March 2020, retrospective cross sectional cohort study
- 28 institution, inhospital, N=1,784

	<b>N=1784</b>	<b>PSP (n=956, 53.6%)</b>	<b>SSP (n=817, 45.8%)</b>	<b>p-value</b>
Age, median (IQR), years	40 (22-70)	23 (12-94)	70 (13-96)	<0.0001
Gender				
Male	1433 (80.3%)	823 (86.1%)	607 (74.3%)	<0.0001
Female	351 (19.7%)	133 (13.9%)	210 (25.7%)	
BMI, median (IQR)	19.2 (17.4-21.2)	19 (11.9-32.6)	19.5 (10-33.9)	0.0178
Smoking index, median (IQR), PY	0 (0-30)	0 (0-150)	30.5 (0-175)	<0.0001
Mode of onset				
First	1031 (57.8%)	540 (56.5%)	483 (59.1%)	0.522
Recurrence	748 (41.9%)	413 (43.2%)	332 (40.6%)	
Unknown	5 (0.3%)	3 (0.3%)	2 (0.2%)	
Affected side				<0.0001
Right	822 (46.1%)	440 (46%)	475 (58.1%)	
Left	921 (51.6%)	502 (52.5%)	316 (38.7%)	
Bilateral	41 (2.3%)	14 (1.5%)	26 (3.2%)	

<b>Underlying disease</b>	<b>N=817 (%)</b>
COPD	438 (53.6%)
Interstitial pneumonia	127 (15.5%)
Pulmonary fibrosis+emphysema	68 (8.3%)
Malignancy	96 (11.8%)
Infection	85 (10.4%)
Catamenial	79 (9.3%)



PSP: Primary spontaneous pneumothorax, SSP: Secondary spontaneous pneumothorax

Fig. 2. Age distribution of the patients with spontaneous pneumothorax in Japan.

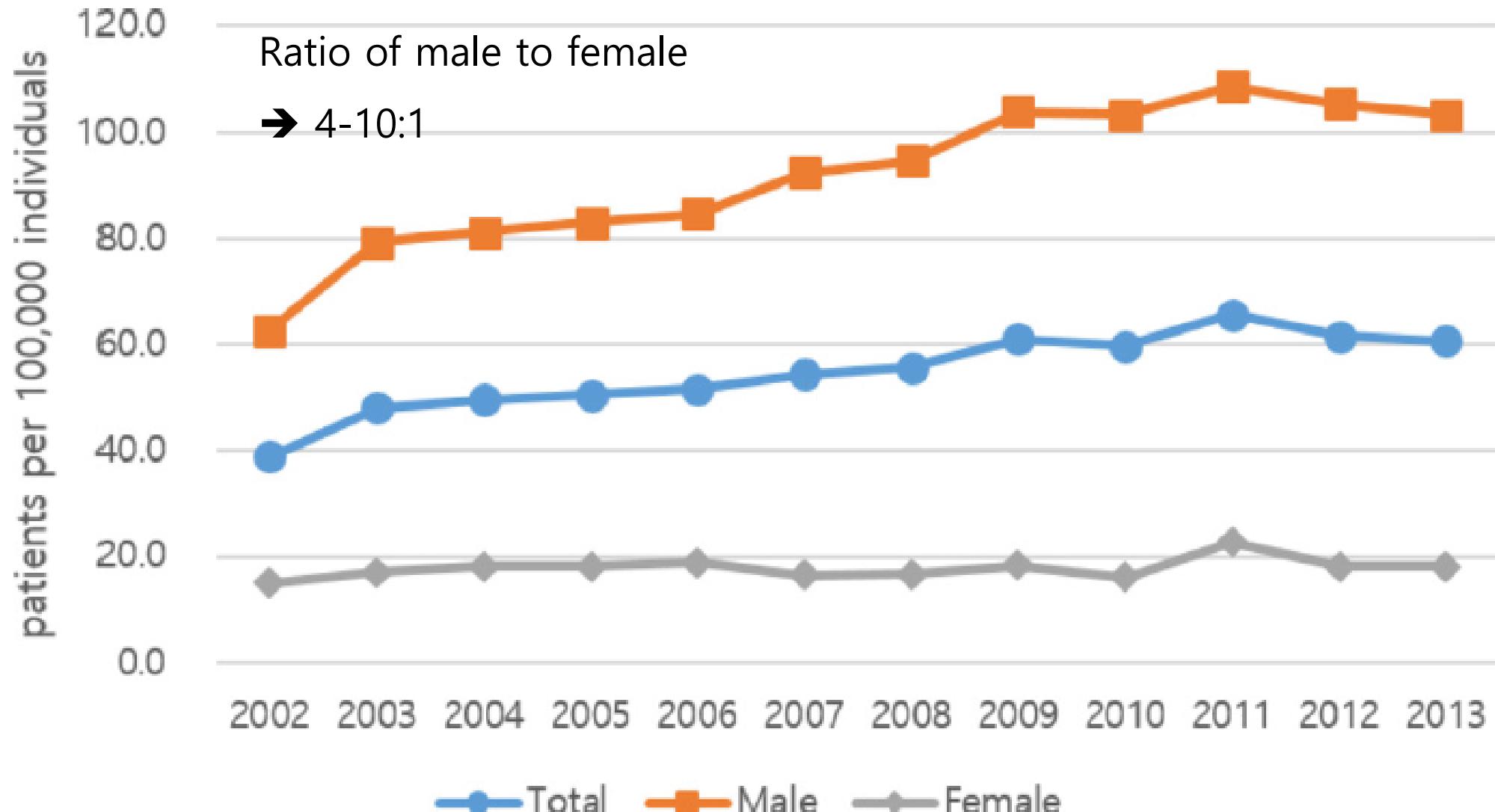
# Epidemiology and medical service use for spontaneous pneumothorax: a 12- year study using nationwide cohort data in Korea

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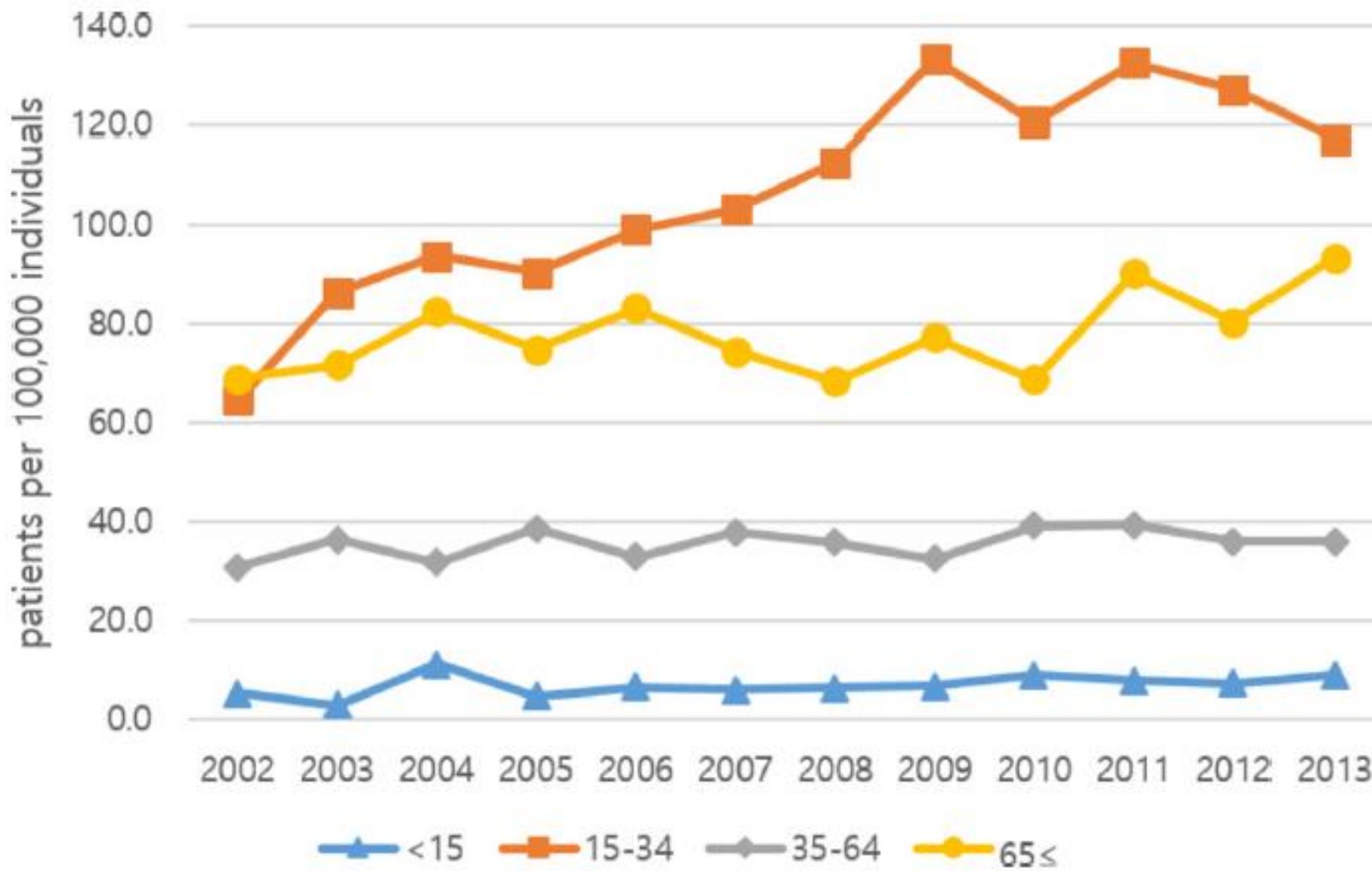
Doori Kim,<sup>1</sup> Boyoung Jung ,<sup>1</sup> Bo-Hyoung Jang,<sup>2</sup> Seol-Hee Chung,<sup>3</sup>  
Yoon Jae Lee,<sup>1</sup> In-Hyuk Ha<sup>1</sup>

Kim D, et al. *BMJ Open* 2019;9:e028624.

- 2002-2013, National Sample Cohort (NSC)
- Hospital admission
- N=4,658



**Figure 1** Annual prevalence rate of spontaneous pneumothorax, by sex (per 100 000 individuals).



**Figure 2** Annual prevalence rate of spontaneous pneumothorax, by age (per 100 000 individuals).

**Table 3** Comorbidities of patients with SP

	15–34 years		35–64 years		≥65 years		Total	
	n	%*	n	%†	n	%‡	n	%§
Total	2407		1374		497		4658	
COPD	273	11.3	277	20.2	287	57.7	837	18.0
Pneumonia	102	4.2	109	7.9	150	30.2	361	7.8
Interstitial	4	0.2	17	1.2	13	2.6	34	0.7
Lung cancer	11	0.5	72	5.2	67	13.5	150	3.2
Asthma	63	2.6	111	8.1	174	35.0	348	7.5
Lung abscess	1	0.0	8	0.6	0	0.0	9	0.2

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# Recent Trend of Pneumothorax in Korea

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\* 질병코드를 모르시는 분은 [한국표준질병·사인분류](#)를 참조하시기 바랍니다.

[검색](#)**질병코드****질병명칭**

J93

기흉

J930

자발성 긴장기흉

J931

기타 자발성 기흉

J938

기타 기흉

J939

상세불명의 기흉

기간구분

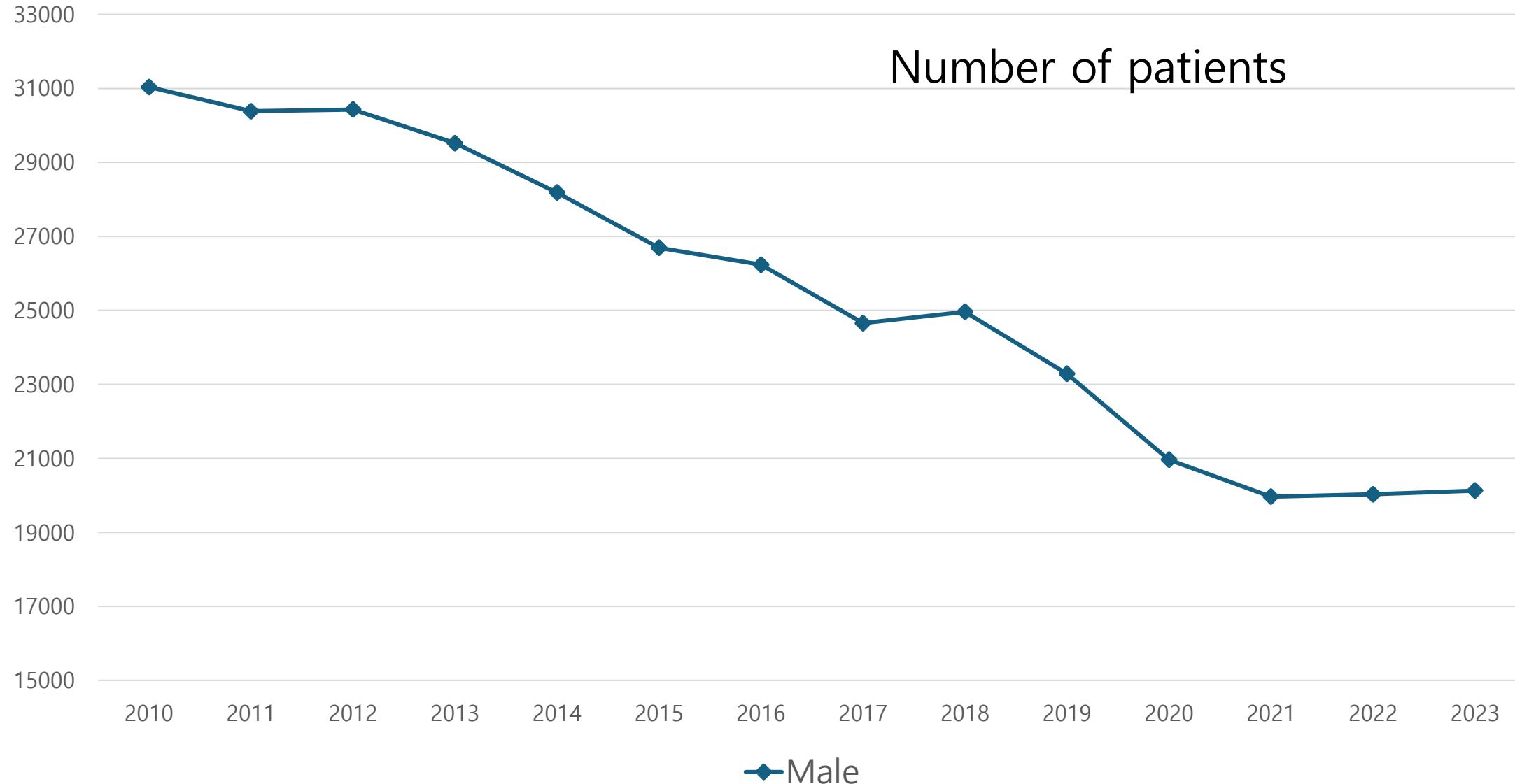
 심사년도  진료년월

2010 ▾

~ 2023 ▾

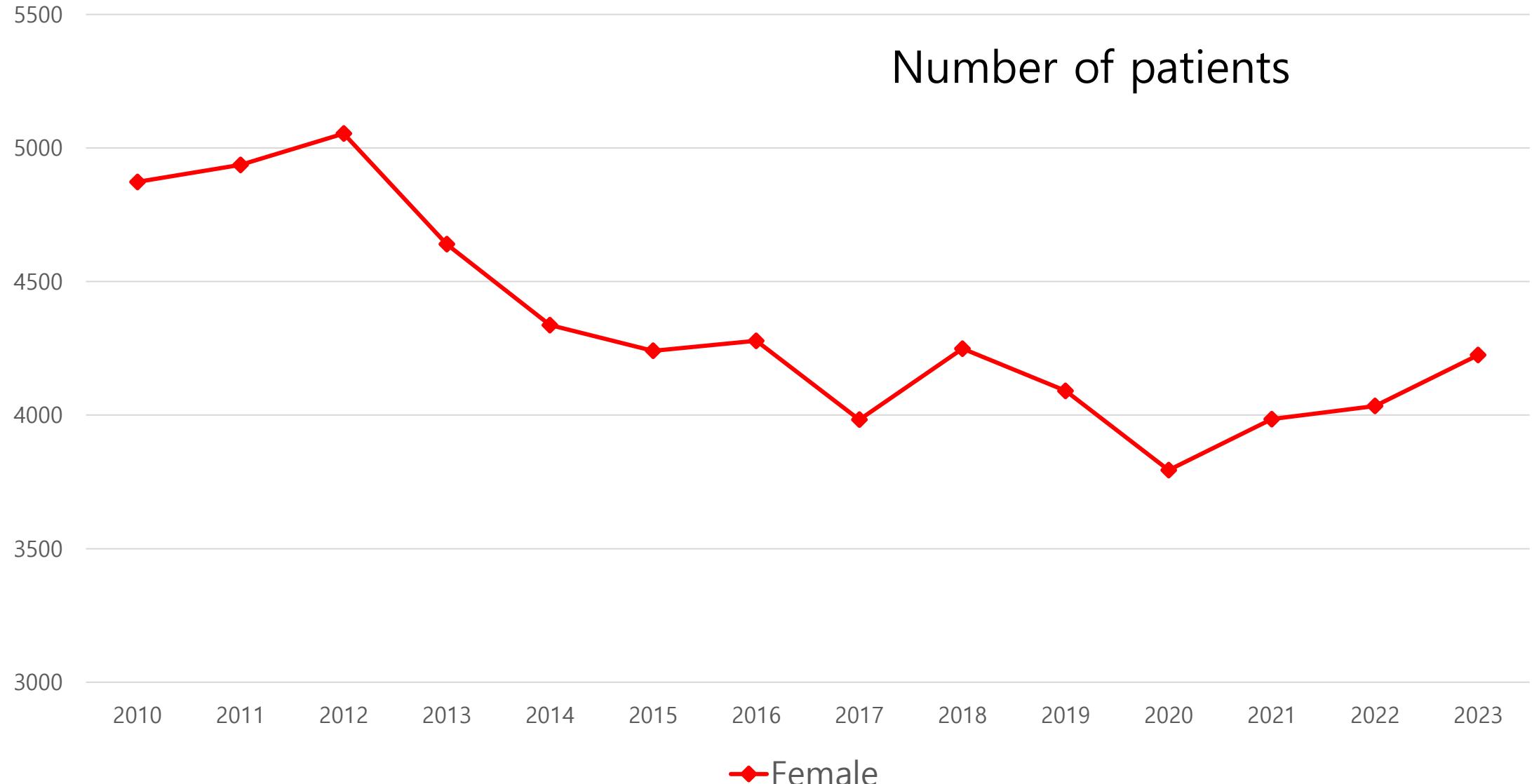
[검색](#)

## Number of patients

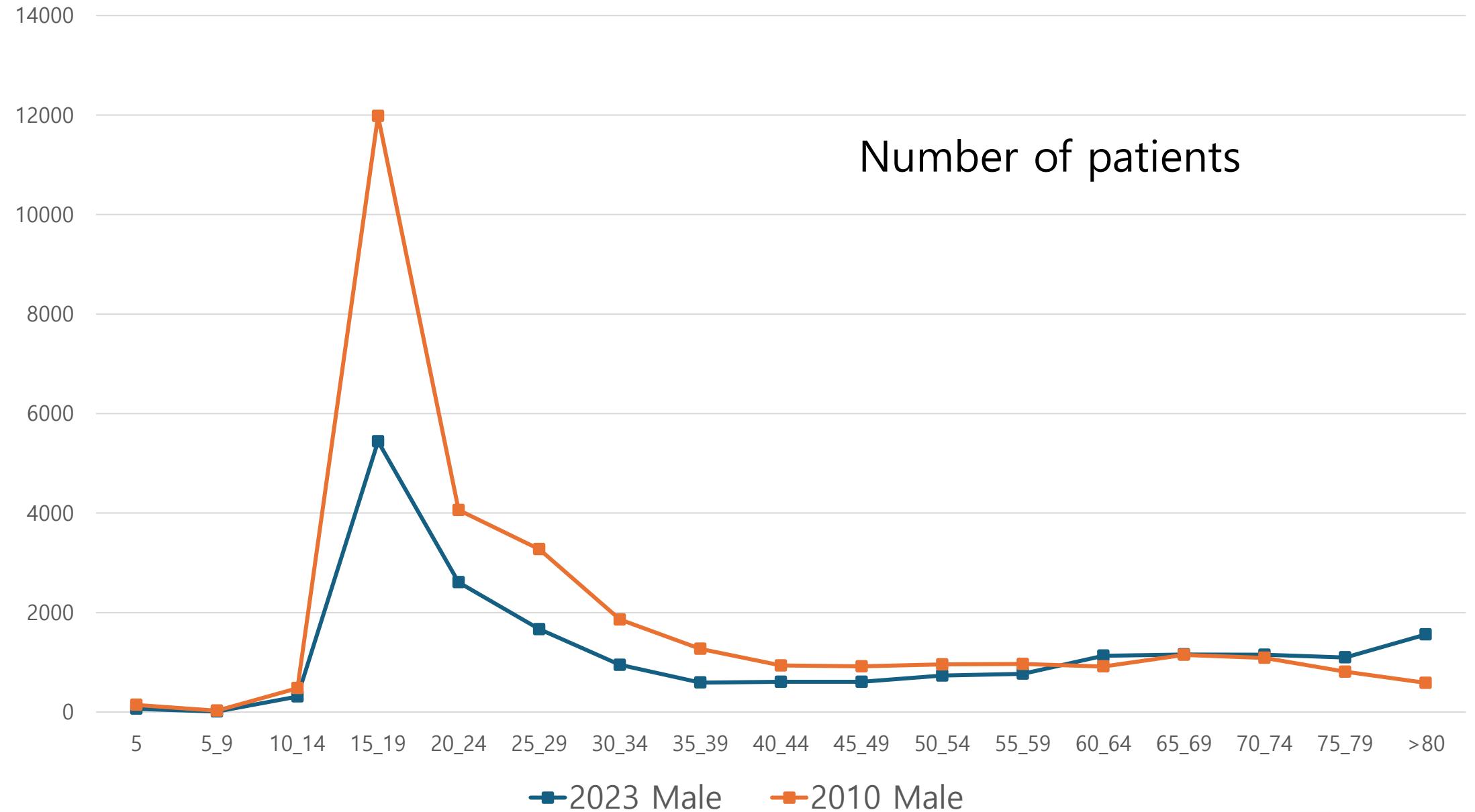


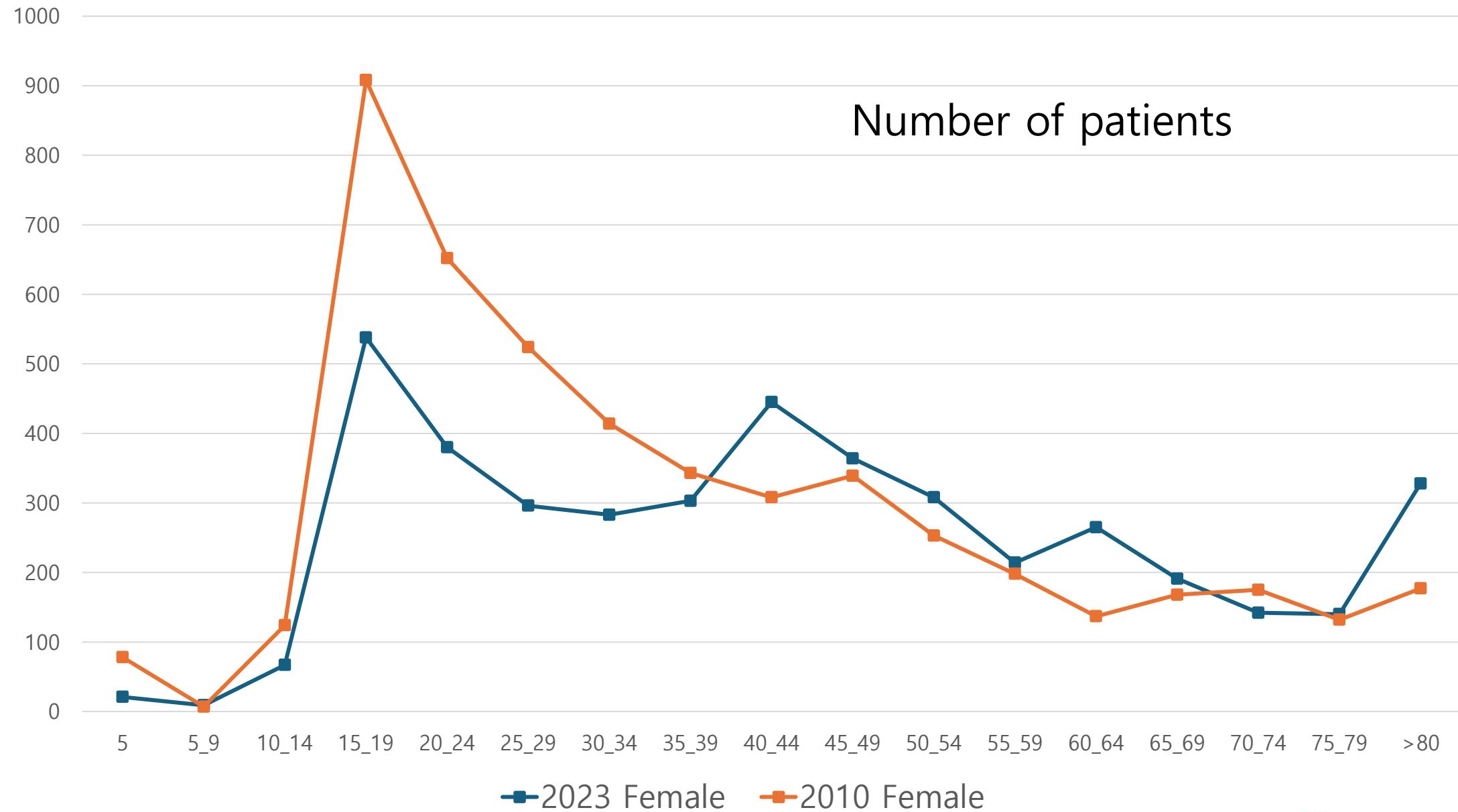
Male

## Number of patients

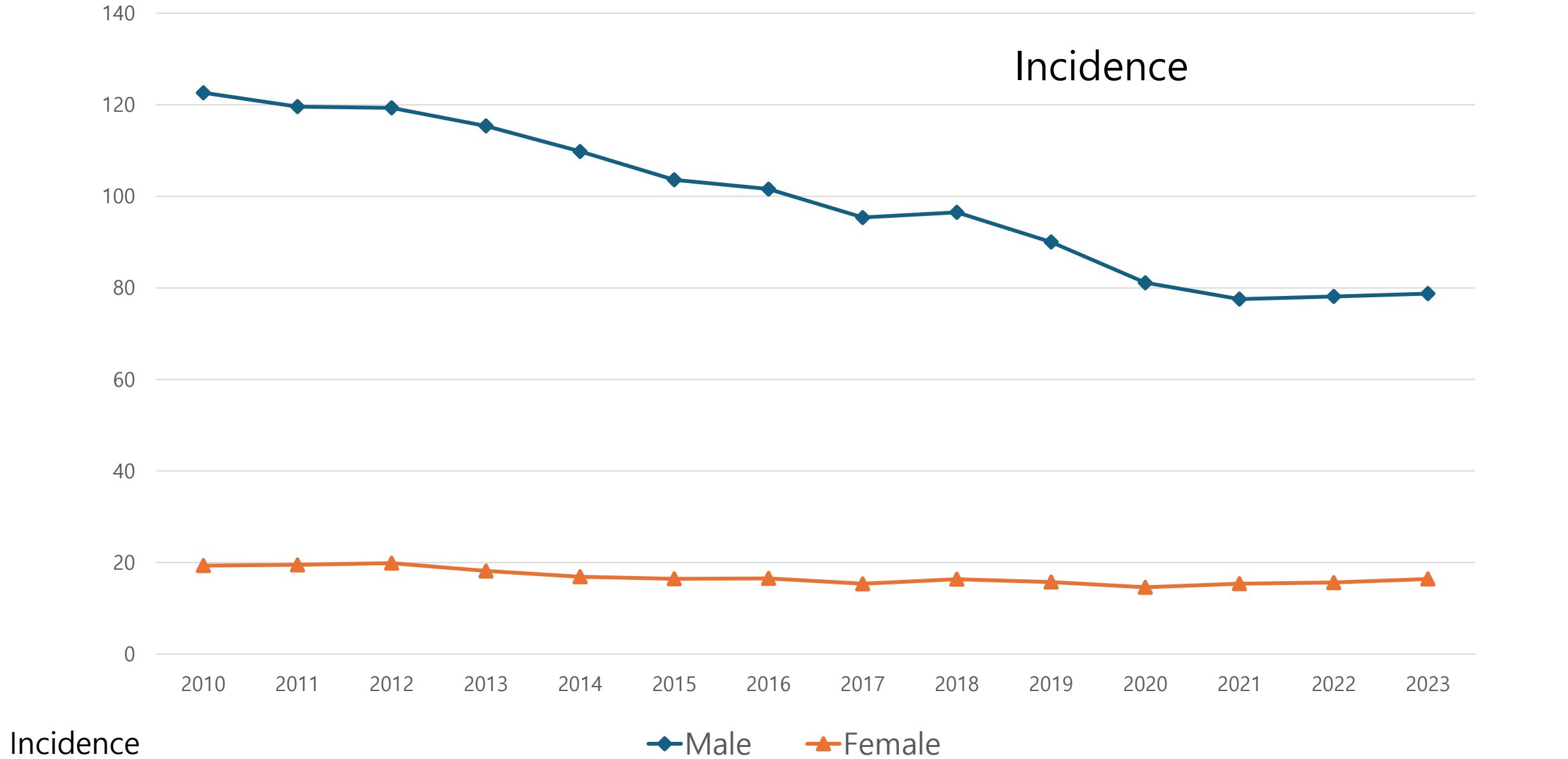


Female



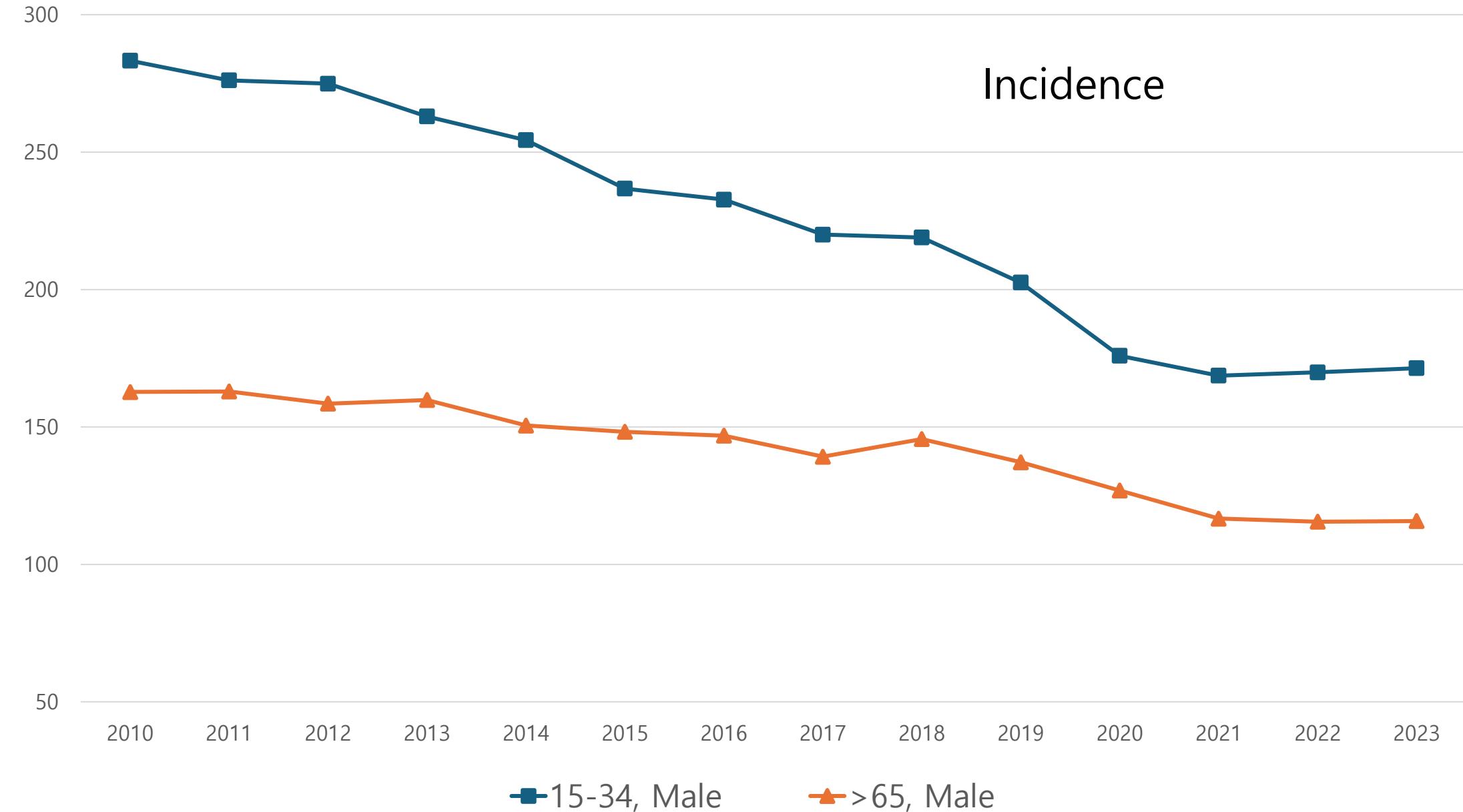


# Incidence

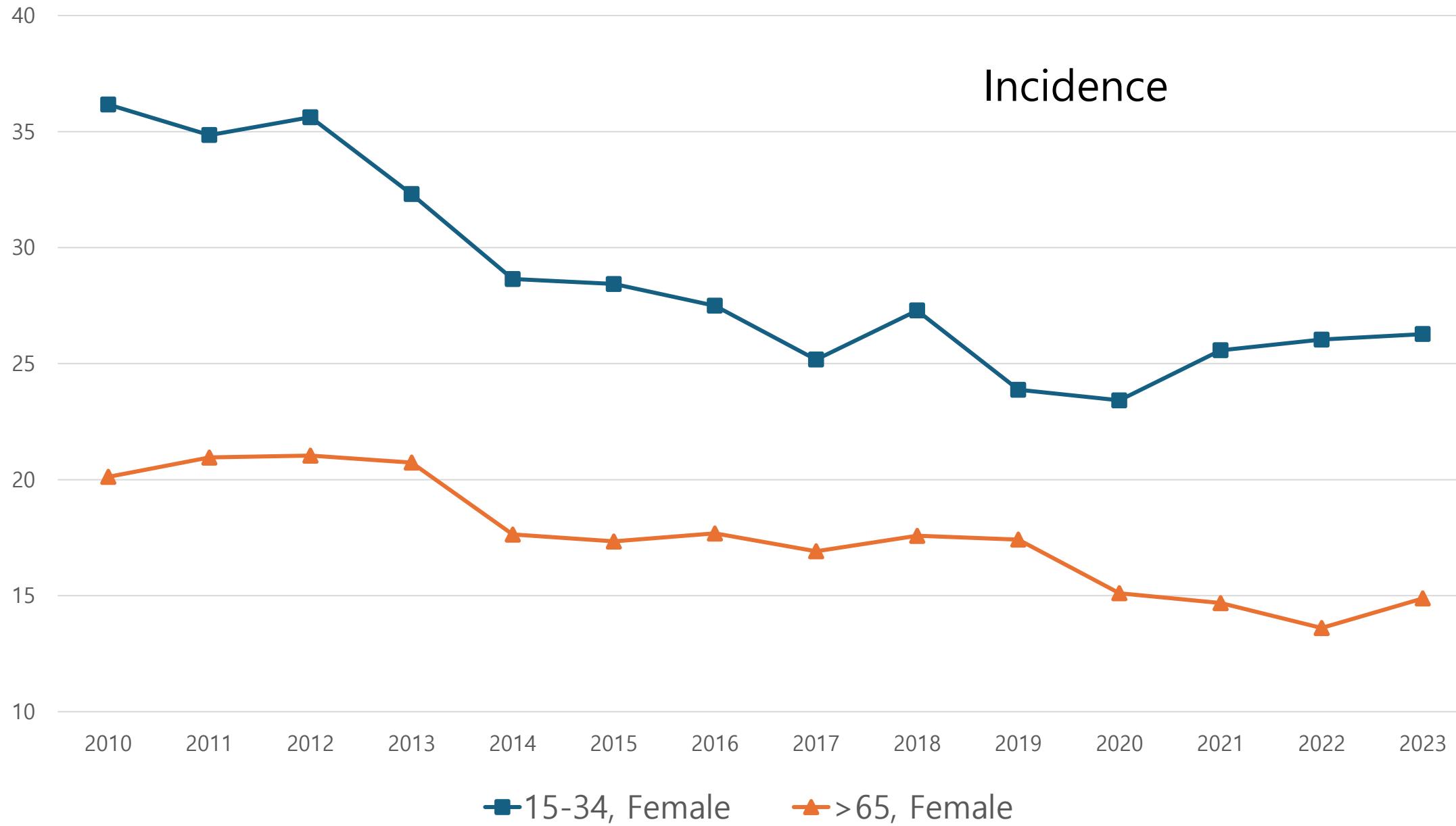


Incidence

◆ Male ▲ Female



## Incidence



# Take Home Message

- Even though epidemiologic studies of pneumothorax using ICD codes have some inherent limitations, the trend might be identified in the large scale data.
- The medical burden for SSP will be gradually increase d/t changes in Korea population dynamics.
- The multi-center, large scale study for the epidemiology of pneumothorax should be planned to seek true real world and understand its original nature in Korea.

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# Thank You for Listening!