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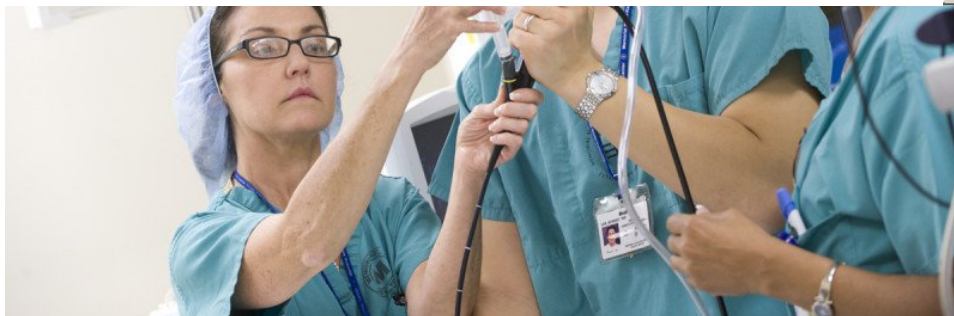
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Other condition first before treating the tracheobronchomalacia.

One or more techniques can be used to treat tracheobronchomalacia at Memorial Sloan Kettering. The treatment your doctor selects depends on the exact location and the extent of the tracheobronchomalacia.

Common treatment options for tracheobronchomalacia include:



Pulmonologist Robert Lee (center) performs procedures such as airway stent placement.

Tracheobronchial Airway Stent — An airway stent is a silicone tube that is placed at the site of the collapse to help keep the airway open. Stents are used as both short- and long-term treatments for tracheobronchomalacia. Airway stenting can be a diagnostic tool as well. Patients whose symptoms improve after airway stenting are likely to benefit from surgical repair.

Tracheobronchoplasty — This surgery can be used to treat the most severe forms of tracheobronchomalacia, especially when the doctor finds that airway stenting has improved symptoms. A surgically placed mesh is used to reinforce and stabilize the wall of the trachea and minimize collapse. This is usually a successful treatment for tracheobronchomalacia with excellent long-term results.

Tracheal Resection and Reconstruction — In rare instances, this type of surgery can be used if the collapse is only in a small part of the windpipe. During a tracheal removal, also called a tracheal resection, the surgeon removes the injured section of the windpipe and rejoins the upper and lower portions.

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Available Monday through Friday, 8 a.m. to 6 p.m. (Eastern time)

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