

CORRESPONDENCE

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In Reply:—Although Kubota *et al.* are correct in pointing out that several reports describing lung collapse during anesthesia secondary to mucous plugging have appeared in the anesthesia literature since 1942,¹⁻⁴ these cases were distinctly different from the case we described.⁵ In contrast to the previous reports describing mainstem bronchus obstruction by mucous plugs following tracheal intubation, our case involved a young, healthy unpremedicated outpatient with *no* preexisting pulmonary disease. In addition, the mucous plugging in our patient occurred *prior* to tracheal intubation.

The primary objective of our report was to make clinicians aware of the possibility of this life-threatening complication occurring in otherwise *healthy* outpatients. Because the right lung obstruction in our patient developed coincident with the administration of mivacurium, a known histamine-releasing drug, it is possible that the muscle relaxant was a contributing factor in this case. We strongly disagree with the suggestion that pulmonary collapse during anesthesia is a common problem.

Finally, we agree with Kubota *et al.* that the straight suction catheter we passed through the tracheal tube may have entered the left mainstem bronchus because of the marked mediastinal shift following collapse of the right lung. However, our inability to suction out the mucus plug also may have been due to the solid consistency of the plug. Kubota *et al.*'s curved-tipped catheter⁶⁻¹¹ or the J-shaped catheter^{12,13} might have been helpful in the management of this case. Unfortunately, these special catheters are not available at our institutions.

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Clever Cure for an Endotracheal Tube Cuff Leak

To the Editor:—Every anesthesiologist has agonized over the problem posed by a leaking endotracheal tube cuff and the risk of exchanging the problem endotracheal tube for a new one. We have evolved a simple and effective solution for defective or broken endotracheal tube cuff one-way valves and pilot balloons. If the en-

dotracheal tube cuff cannot be inflated or will not stay inflated and the problem can be localized to the one-way valve, the pilot balloon, or the distal portion of the inflation tube, this technique will effect a simple, long-term solution.

Cut the inflation tube to remove the defective elements. Cut a