

**Bronhopneumonia  
purulenta**

**et**

**apostematosa**

(irinleşmeye,  
apseleşmeye eğilimli  
pneumoniler )

- ▶ This type of pneumonia is an inflammation of neutrophil leukocytes. Diffuse or focal spread of these cells in the lung; They are characterized by the dissolution of the region (by necrosis) with the help of proteolytic enzymes released from them.
- ▶ Neutrophil leukocyte infiltration and melting (necrosis) are generally not common, but focals.
- ▶ For this reason, inflammation is common purulent, more than pneumonia, ie, pneumonia apostomatosa.

# Pathogenesis

It occurred mainly of 3 ways.

- **It is shaped as a result of catarrhal-purulent bronchopneumonia or fibrinous pneumonia. In this case, there are other findings about pneumonia in which the abscess is formed.**
- **It can be shaped due to trauma.**
- **The most important of them is purulent embolic-metastatic pneumonia (embolic-metastatic pneumonia apostematosa). The factors are hematogenous.**

# *Embolic-Metastatic Purulent Pneumoni*

- It occurs in septic emboli of the fusions occurring in other parts of the body, Purulent **endocarditis, peritonitis; panaritium mastitis, endometritis (pyometra) and omphalophlebitis etc**



► Causative Agents:

Streptococcus spp., Staphylococcus spp., Actinomyces pyogenes, Corynebacterium spp., E. coli etc **pyogen agents** or Fusobacterium necrophorum

Salmonella sp.,

Shigella (Actinobacillus) equi

## **Microscopical Findings :**

**Alveolar, bronch lumen, interalveolar, interlobular areas with multiple neutrophil leukocytes and coagulation necrosis are encountered in the area.**

**There is a demarcation belt consisting of neutrophil leukocytosis around the necrosis areas.**

## **Apostematous Pneumonia :**

**Small abscesses in focal and large encapsulated neutrophile leucocytes.**