

Table 1. *Mechanisms of pleural fluid accumulation.*

Pleural fluid accumulation mechanisms
Increased production rate
With normal integrity of the endothelial and mesothelial membranes. • Raised capillary hydrostatic pressure (e.g. congestive heart failure) • Raised intrathoracic sub-atmospheric pressure (e.g. atelectasis) • Low capillary oncotic pressure as in hypoalbuminemia (e.g. cirrhosis, nephrotic syndrome, malnutrition)
With disrupted permeability of the endothelial membrane. • Local disruption of pleural integrity (e.g. pneumonia, pulmonary embolism, cancer)
Extrapulmonary pathology (e.g. hepatic hydrothorax)
Low reabsorption rate
Disrupted integrity of lymphatic vessels at the level of the stomata or along their course (e.g. cancer, thoracic duct rupture)
Increased Central Venous Pressure.