The injuries of thoracic duct cause the leakage and retention of chylus fluid in the pleural cavity that this fluid itself can cause an acute or chronic disorder in breathing system.

One of the chylothorax factors is trauma which almost always unilateral and occurs at the left side of chest. This fluid generally has a large volume and causes symptoms and signs and can be drained by chest tube. By flowing of this fluid, the patient will have some other problems as dehydration, malnutrition, depletion of lymphocytes in the circulation and multiple infections.

Our patients who will be discussed here is a 20 year old man who in the holy defense and in freeing of Khoramshahre front was injured by a bullet in his right side of chest. He went on thoracotomy at the admission because of severe hemothorax, but his bleeding was continuing.

Eight hours after the first surgery. I made the second operation on him (antrolateral thoracotomy) because of bloody brown secretions which was mixed with fat drops. During the explosion, on the card, a little shifted to left and exactly above the diaphragm, there was a little rupture by 6-7 millimeters which had chilous flowing from the distal and venous bleeding from the proximal head. This rupture was sutured and ligated and the patient was discharged 6 days later.