Title: Video-assisted thoracoscopic surgery of mediastinal cysts: Report of 13 cases

Dr. Yener 4183 Aydin dryeneraydin@hotmail.com MD ¹, Dr. Omer 4184 Araz dromeraraz@gmail.com MD ², Dr. Mesut 4185 Ozgokce mozgokce@gmail.com MD ³, Dr. Ilker 4186 Ince ilkerince1983@yahoo.com MD ⁴, Dr. Fatih 4187 Alper drfatihalper@gmail.com MD ³ and Dr. Atilla 4188 Eroglu atilaeroglu@hotmail.com MD ¹. ¹ Department of Thoracic Surgery, Ataturk University, Erzurum, Turkey, 25070 ; ² Department of Chest Diseases, Ataturk University, Erzurum, Turkey, 25070 ; ³ Department of Radiology, Ataturk University, Erzurum, Turkey, 25070 and ⁴ Department of Anesthesia and Reanimation, Ataturk University, Erzurum, Turkey, 25070 .

Body: Background: Mediastinal cysts are rare anomalies. The purpose of this study was to present our experience with mediastinal cysts who were thoracoscopic treated in our clinic and to discuss our findings along with those from the literature. Methods: We retrospectively investigated 13 patients who were diagnosed and thoracoscopic treated for mediastinal cysts in our clinic between January 2008 and December 2011. Results: Seven patients were female and six patients were male. The average age of the patients was 41.3 ± 20.3 (7-82 years old). The mediastinal cysts comprised five pericardial cysts; four bronchogenic cysts; one hydatid cyst; one benign cystic teratoma; one thymic cyst; and one neurenteric cyst. In a case with ruptured hydatid cyst, we passed to thoracotomy intra-operatively due to presence of advanced adhesion related to inflammation. Postoperative complication and mortality did not occur in any case. The average postoperative hospitalization period was 3.8 days (2-7 days). Conclusion: Video-assisted thoracoscopic surgery in mediastinal cysts is a reliable and effective approach with low morbidity and a shorter hospital stay. Keywords: Mediastinal cyst, VATS.