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**Title:** Multidisciplinary approach in management of extended and multifocal benign tracheal stenosis: Lessons learned

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**Body:** Background. Frequency of benign scar stenoses of trachea after carrying out the emergency care varies from 0,2 to 25%. Treatment of patients with extended or multifocal tracheal stenoses still remain difficult task. Aims. To study results of multidisciplinary tactics in treatment of extended and multifocal cicatricial stenoses of trachea. Materials and methods: There were 172 patients with extended and multifocal benign tracheal stenoses. With extended stenoses there were 153 patients (89%), and with multifocal defeat 19 patients (11%). Among them 103 (60%) were men and 69 (40%) were women aged from 9 till 76 years (middle age of 36 years). Postintubation stenosis was in 24(14%) cases and posttracheostomy stenosis was in 126 (73%). Totally 452 airways interventions were performed in 172 patients, including 64 segmental resection of a trachea, 169 tracheoplasty with T-tube, 92 elimination of tracheal defect, 125 endoscopic procedures. From clinic discharged 169 patients. The lethality was 1,7%. The complications were in 39 cases (8,6%). Most often complications occured after endoscopic operations 19 (4,2%). Thus the health as good was estimated by 40% of patients, 43% of patients felt well. Unsatisfactorily results of treatment (17%) were connected with preservation of tracheostomy. Conclusions. In case of extended cicatricial stenoses of a trachea the one-stage extensive resection of a respiratory way with the anastomosis is possible only in 14% of patients. Preliminary elimination of tracheostomy and also formation of the top departments of a respiratory way by means allows to perform segmental resection of chest department of a trachea with good clinical results.