European Respiratory Society Annual Congress 2013

Abstract Number: 537

Publication Number: P453

Abstract Group: 8.1. Thoracic Surgery

Keyword 1: Lung cancer / Oncology Keyword 2: Mediastinal tumour Keyword 3: Sarcoidosis

Title: Diagnostic value of cervical mediastinoscopy: Report of 506 cases

Dr. Mehmet 4751 Erol muharremerol@hotmail.com MD ¹, Dr. Hüseyin 4752 Melek hmelek@gmail.com MD ¹, Dr. Ahmet 4753 Bayram asbayram@gmail.com MD ¹, Dr. Tayfun 4754 Kermenli kermenlit@uludag.edu.tr MD ¹, Dr. Funda 4755 Coskun coskunf@uludag.edu.tr MD ², Dr. Elif 4756 Akyildiz akyildize@uludag.edu.tr MD ³ and Prof. Dr Cengiz 4757 Gebitekin gebitekinc@gmail.com MD ¹. ¹ Department of Thoracic Surgery, Uludag University, Bursa, Turkey; ² Department of Chest Diseases, Uludag University, Bursa, Turkey and ³ Department of Pathology, Uludag University, Bursa, Turkey.

Body: Introduction In this study we present analysis of our cases that had diagnostic mediastinoscopy. Objectives The most frequently applied area of mediastinoscopy is staging of lung cancer. The second most common use is for diagnostic procedures. It is a convenient and minimally invasive procedure for diagnosis of mediastinal adenopathies (LAP), and the masses. In this study we present analysis of our cases that had diagnostic mediastinoscopy. Methods We retrospectively evaluated our 1102 cases of cervical mediastinoscopy between 1997 - 2012. We included our 506 cases that we had diagnostic mediastinoscopy (45%). In all cases of with enlarged lymph nodes detected in thoracic computed tomography (CT) biopsy samples were taken. Results Diagnostic mediastinoscopy rate was 45% (506). we performed diagnostic video mediastinoscopy in 67 % of cases (340. Average procedure time was 26.4 min (18-48) and no intraoperative or postoperative mortality occured. Diagnosis was obtained in 93% of cases. Among cases, 31 (7%) did not have a positive pathological diagnosis in the lymph nodes biopsied. Sarcoidosis was a occupied the widest area in the diagnostic scale chart. Conclusions In order to perform a biopsy of mediastinal lymph nodes and masses; EBUS and EUS methods have been began to be used in recent years. However, expensive installation process and need of experienced endoscopist limits its widely use yet. These diagnostic methods are methods that complement each other. Mediastinoscopy allows the surgeon to see lesions with the naked eye and biopsy material ensures larger biopsy specimens compared to other methods. In addition, in cases that were not given a diagnosis with other methods mediastinoscopy ensures definite diagnosis.