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**Title:** Post-bronchoscopy sputum in the current bronchoscopy technique dose not improve the diagnostic yield in thoracic malignancies

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**Body:** [Introduction]The utility of post-bronchoscopy sputum (PBS) for the diagnosis of thoracic malignancies (primary or metastatic lung cancer) was reported in the previous study. Recently, the diagnostic yield in thoracic malignancies has been improved by endobronchial ultrasound bronchoscopy and thin section computed tomography (CT). It is not clear whether PBS is useful for the diagnosis of thoracic malignancies in the current bronchoscopy technique. Therefore, we examined the diagnostic value of PBS in thoracic malignancies. [Patinets and Methods]In this prospective observational study, patients who were suspected thoracic malignancies and underwent bronchoscopy in our hospital between July 2012 and January 2013 were eligible. We used endobronchial ultrasound bronchoscopy and five respiratory specialists identified the bronchus to the lesion in thin section CT before the procedure. Sampling PBS for cytology was performed within 1 day after bronchoscopy. [Results]The overall diagnostic rate was 66.7%(36/54), (Adenocarcinoma: 25, Squamous cell carcinoma: 5, Small cell carcinoma: 2, other malignancy: 4). The rate of sampling PBS was 75.9%(41/54). The diagnostic rate with the PBS was 26.8%(11/41), (Adenocarcinoma: 11), and no patient was able to be diagnosed only with PBS. [Conclusion]PBS in the current bronchoscopy technique dose not improve the diagnostic yield in thoracic malignancies. PBS might not be necessary for the diagnosis of thoracic malignancies.