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Title: The use of surgical services in the management of suspected lung cancers

Dr. Anob 26579 Chakrabarti anob.chakrabarti@nhs.net MD ¹, Mr. Martin 26580 Hayward martin.hayward@uclh.org MD ² and Dr. Sajid 26581 Khan sajid.khan@bcf.nhs.uk MD ¹. ¹ Department of Respiratory Medicine, Barnet and Chase Farm Hospitals NHS Trust, London, United Kingdom, EN5 3DJ and ² Department of Thoracic Surgery, University College London Hospitals NHS Foundation Trust, London, United Kingdom, W1G 8PH .

Body: Introduction The National Lung Cancer Audit Report 2011 identified an average surgical rate of 14% in England and Wales. This focuses on potentially curative surgery (with the exception of mesothelioma) and so does not encompass the full breadth of surgical intervention undergone by our patients. This study aimed to describe this spectrum for our patient population in a secondary care setting. Method The electronic patient record system was searched for all patients discussed at multidisciplinary meetings in 2010. Data was gathered from letters, operation notes and meeting minutes on the system. Results 1172 cases were discussed of which 212 (18%) had confirmed lung cancer. In these, 74 (37.7%) procedures were performed. 1.4% of patients had two procedures. 8.0% had a lobectomy, 4.7% a wedge resection or segmentectomy, 14.6% a VATS drainage of effusion, biopsy and/or pleurodesis (4.2% for mesothelioma) and 5.2% other procedures. For 2.4% there was no data. After surgery, histology revealed NSCLC in 52.7%, mesothelioma in 13.5%, SCLC in 2.7%, carcinoid in 1.4% and no malignancy in 6.8%. In 5.4%, a differential diagnosis was given, and in 17.6% there was no data. From all discussed cases, 100 (8.5%) procedures were done. The average age was 70 years. Of the 26 procedures in patients without eventual lung cancer, the diagnosis prior to surgery was considered to be cancer in 69.2%, empyema in 19.2%, tuberculosis in 7.7% and lymphoma in 3.8%. Of these cases, histology showed metastatic disease with a non-lung primary in 23.1%. Conclusion In our patient population a surgical procedure is performed in 37.7% of patients with lung cancer. This is higher than the surgical rate of 16.9% according to the audit criteria.