

European Respiratory Society Annual Congress 2013

Abstract Number: 2699

Publication Number: P2933

Abstract Group: 11.2. Pleural and Mediastinal Malignancies

Keyword 1: Lung cancer / Oncology **Keyword 2:** Pleura **Keyword 3:** Treatments

Title: Outcomes of bedside talc slurry pleurodesis for malignant pleural effusions: A retrospective analysis

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Body: Introduction Current guidelines recommend either administration of talc slurry via an intercostal drain or talc poudrage by thoracoscopy for the treatment of symptomatic malignant pleural effusions. Published success rates for bedside pleurodesis range from 60 - 95%, however anecdotally these rates are more commonly at the lower end of the spectrum in clinical practice. The issue is complicated by lack of standardized definition of “success” making it difficult to compare different studies. We explored the outcomes of talc pleurodesis in our setting. Methods All patients undergoing talc pleurodesis from February 2009 to April 2011 were included. A retrospective analysis of their hospital records and thoracic imaging was undertaken. Primary outcomes were fluid recurrence & need for further interventions. Results 41 patients underwent bedside pleurodesis for malignant pleural effusion; 25 for lung malignancy and 16 for other malignancies. 15 patients required further interventions (repeat drainage, VATS, PleurX drain, etc.) 26 (63%) patients did not require further intervention; however fluid re-accumulation was noted in 21 (51%) patients.

Table 1

	Lung Malignancy	Other malignancy
Patients undergoing pleurodesis	25	16
Patients requiring further intervention	11 (44%)	4 (25%)
Patients with fluid recurrence	14 (56%)	7 (43%)
Median survival post pleurodesis (days)	67	49

Conclusions 63% of patients required no further intervention; this success rate is comparable with other published studies accepting the difficulty of a direct comparison, but is lower than talc poudrage (80 - 90%). This raises the issue whether thoracoscopic pleurodesis should be the intervention of choice in more

patients.