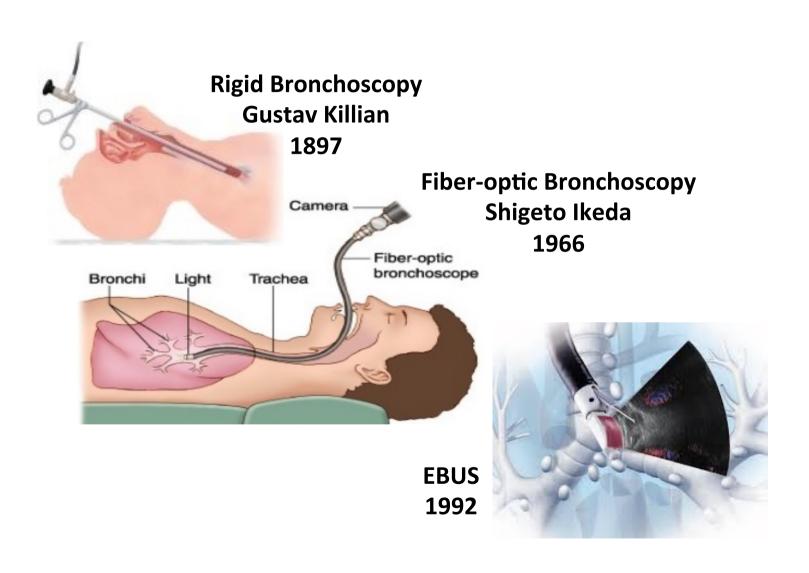
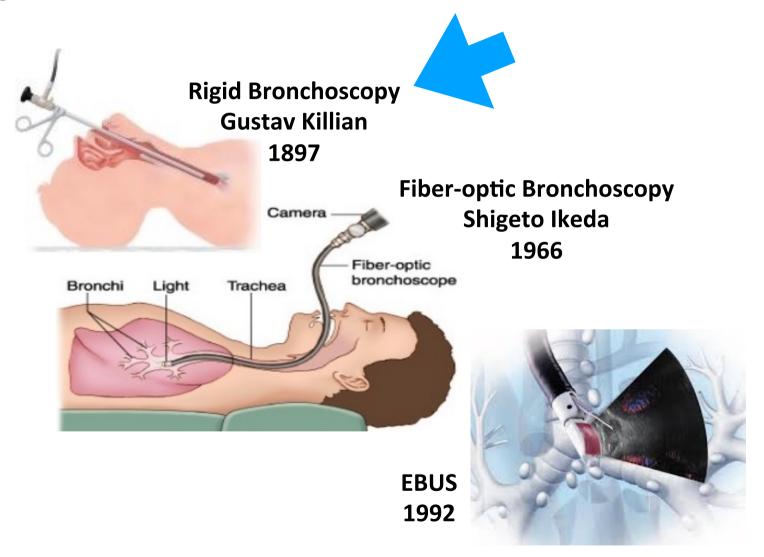




Historie



Historie



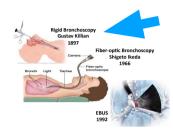


Historie

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- EBUS vs Mediastinoscopy
- EBUS vs Mediastinoscop
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- · EBUS and other pathologies
- · Complications and Contraindications
- Conclusions

ial ultrasound EBUS







Background and Indications

- · Diagnose and Stage Lung Cancer
- Help evaluate Mediastinal lesions, intrapulmonary nodules, endobronchial lesions and even bronchial invasion
- Guidance of endobronchial therapy (Resections, debridement, stricture dilation, stenting, laser therapy, argon plasma coagulation and cauterization)
 Eur Respir J 2002,20.118 –21.
- 155000 cases per year in US. Only 20% of pulmonologist perform TBNA.

Conscious Sedation vs General Anesthesia





Tolerable under moderate sedation or Monitored Anesthesia Care (MAC)

Costly, easy to perform Mild difficulty in the high



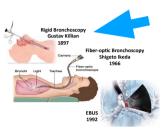


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Diagnose and Stage Lung Cancer

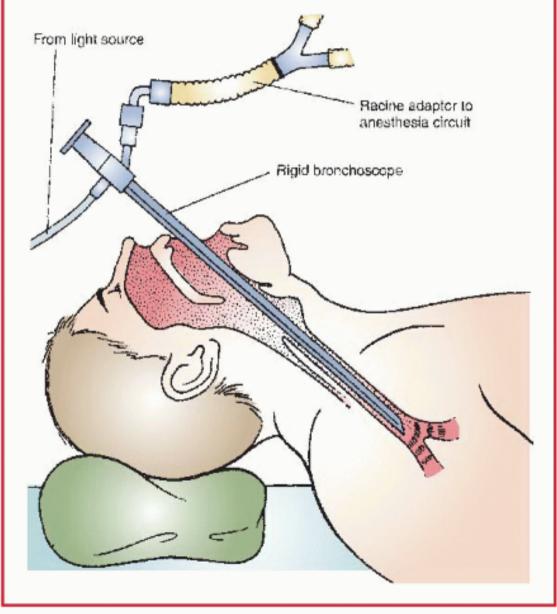
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Tolerable u sedation Anesthes



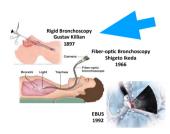


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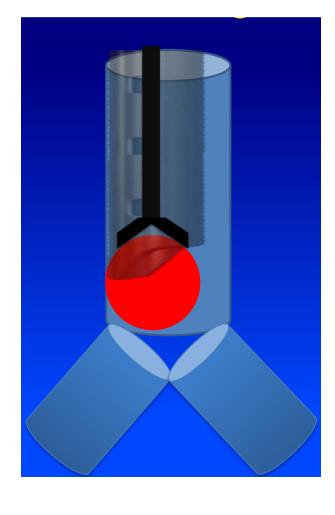
tik muliggør undersøgelser, ærktøj muliggør bioptering

Background and Indications

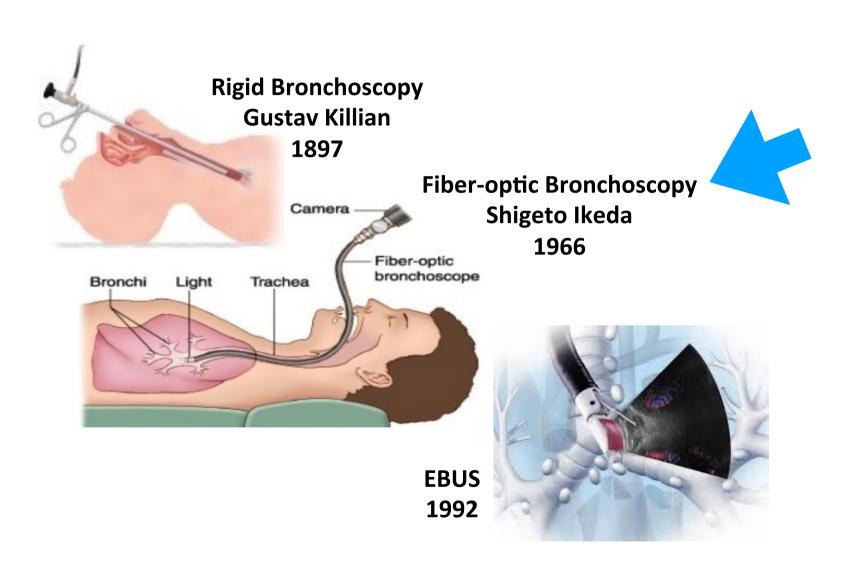
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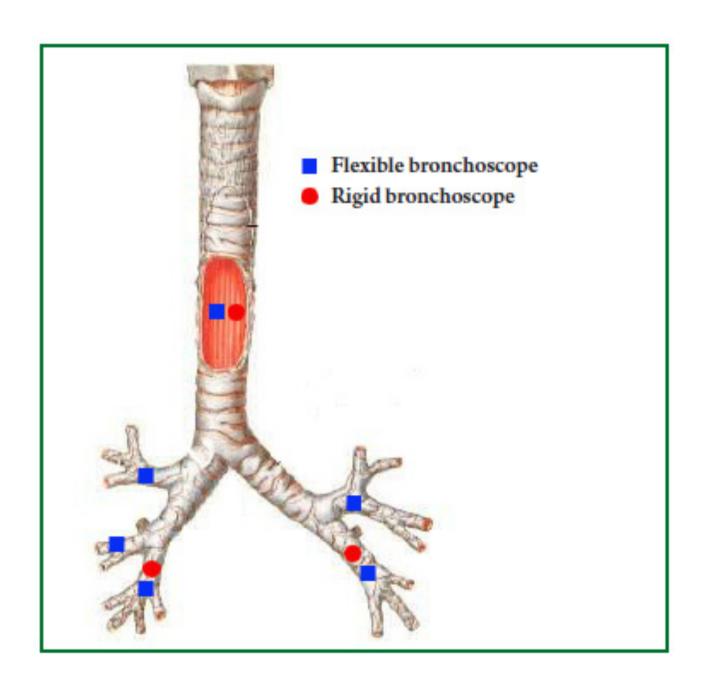
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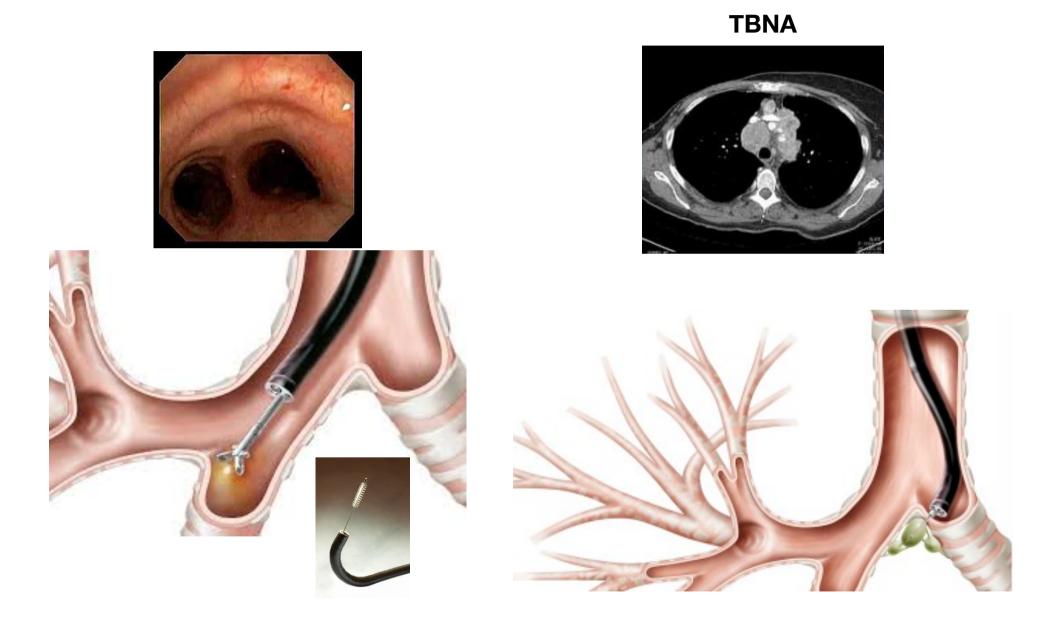


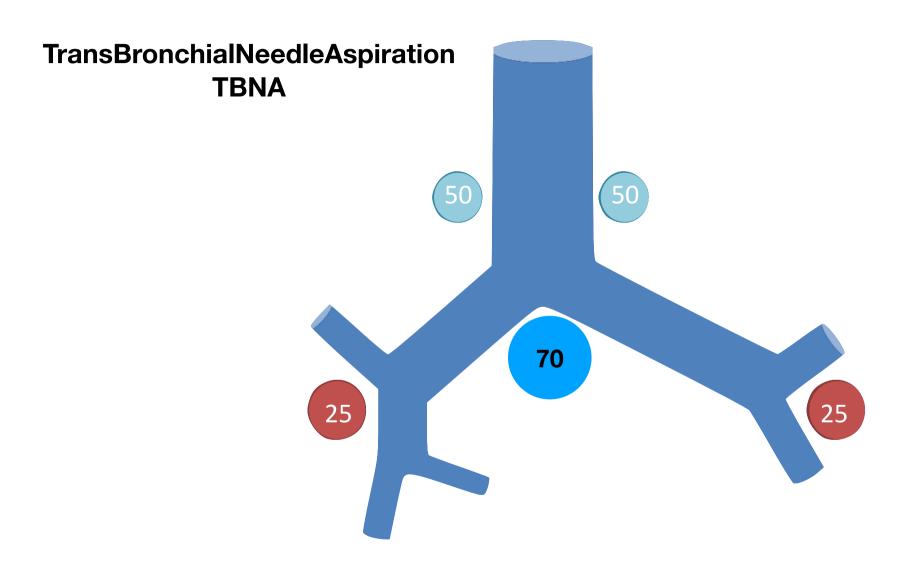


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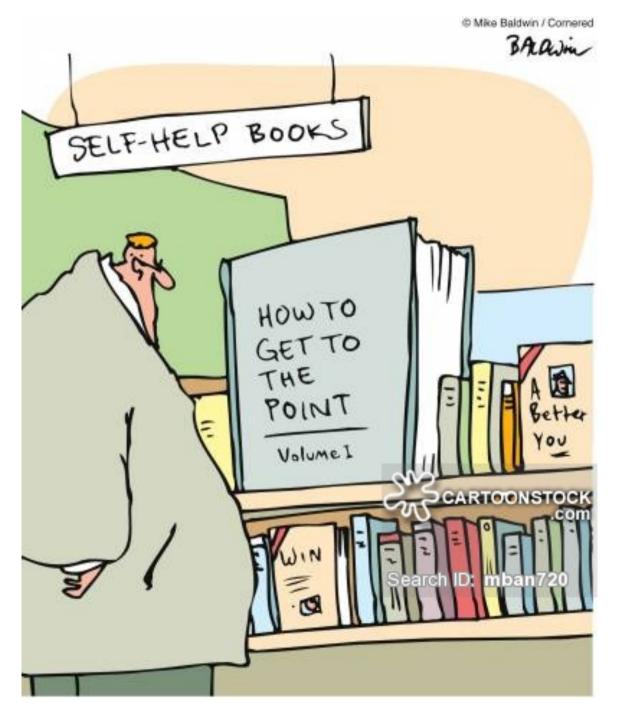




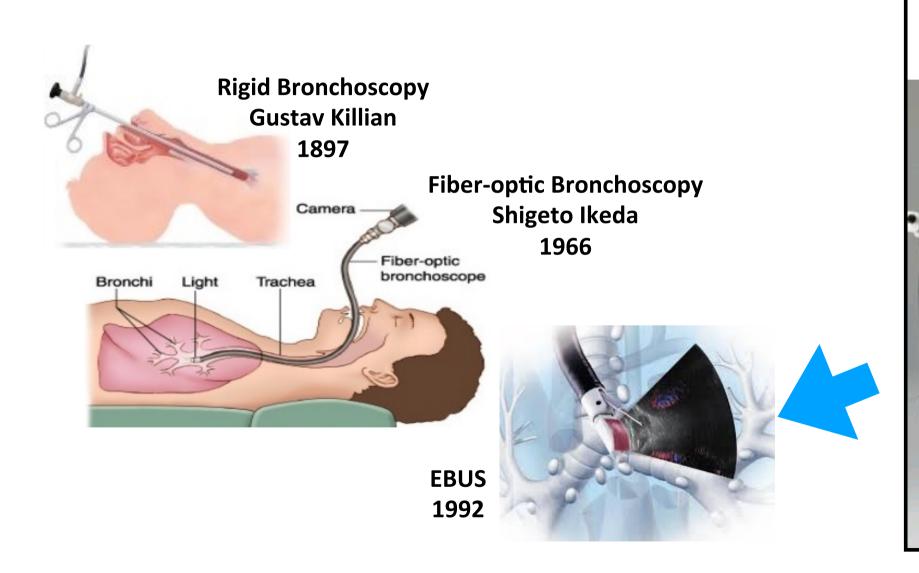


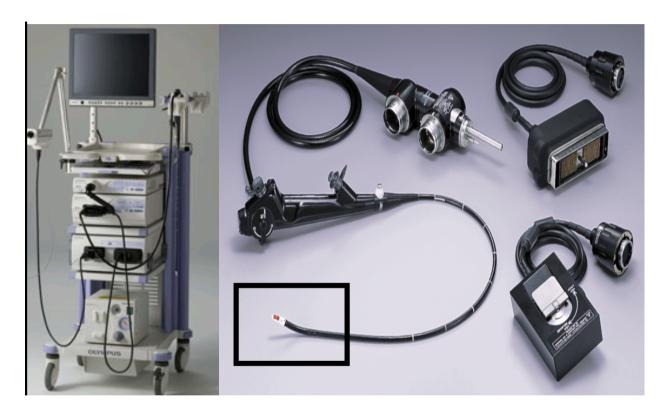
¹Holty et al. Thorax 2005;60:949-955

²Detterbeck et al. Chest 2007;132:202S-220S



Historie

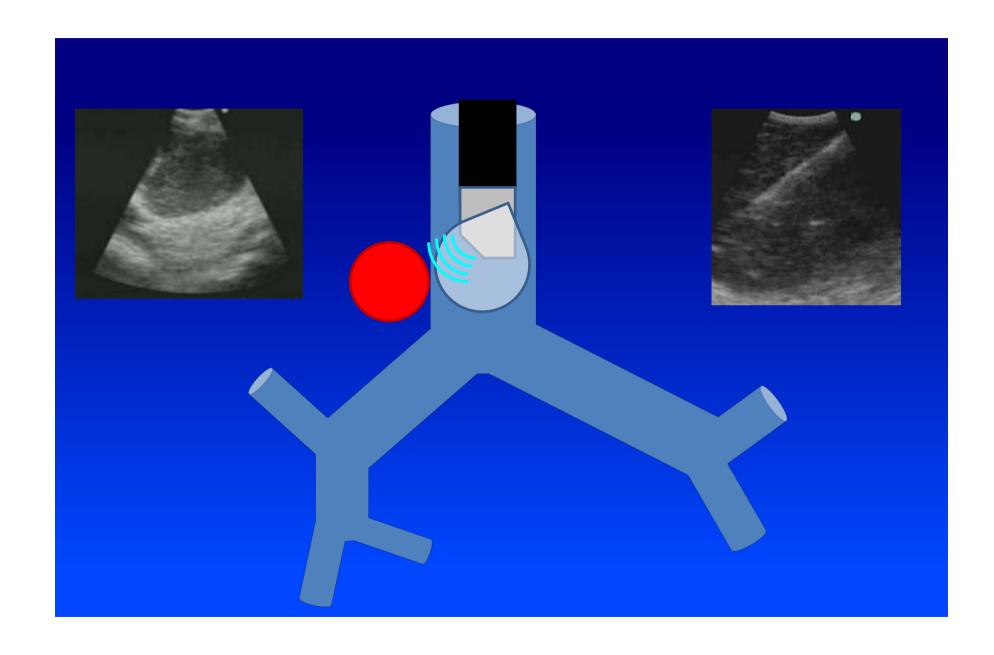


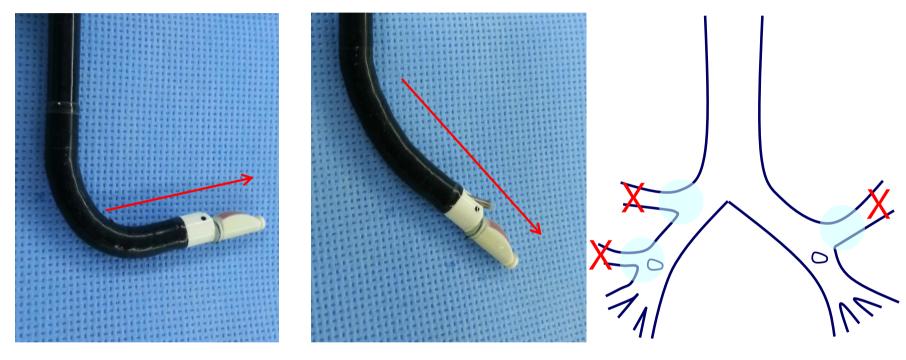


Lineær probe



Conscious Sedation vs General



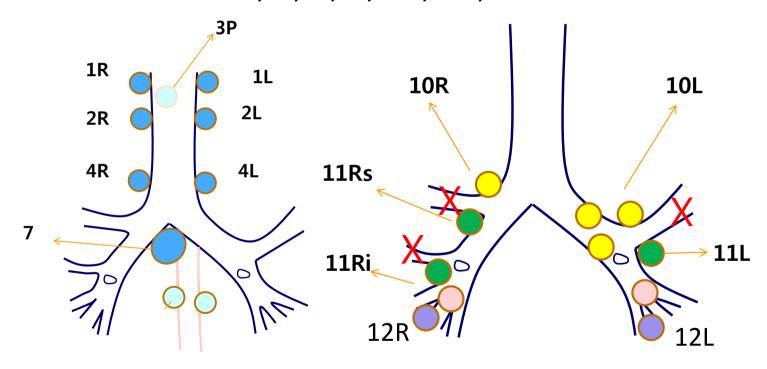


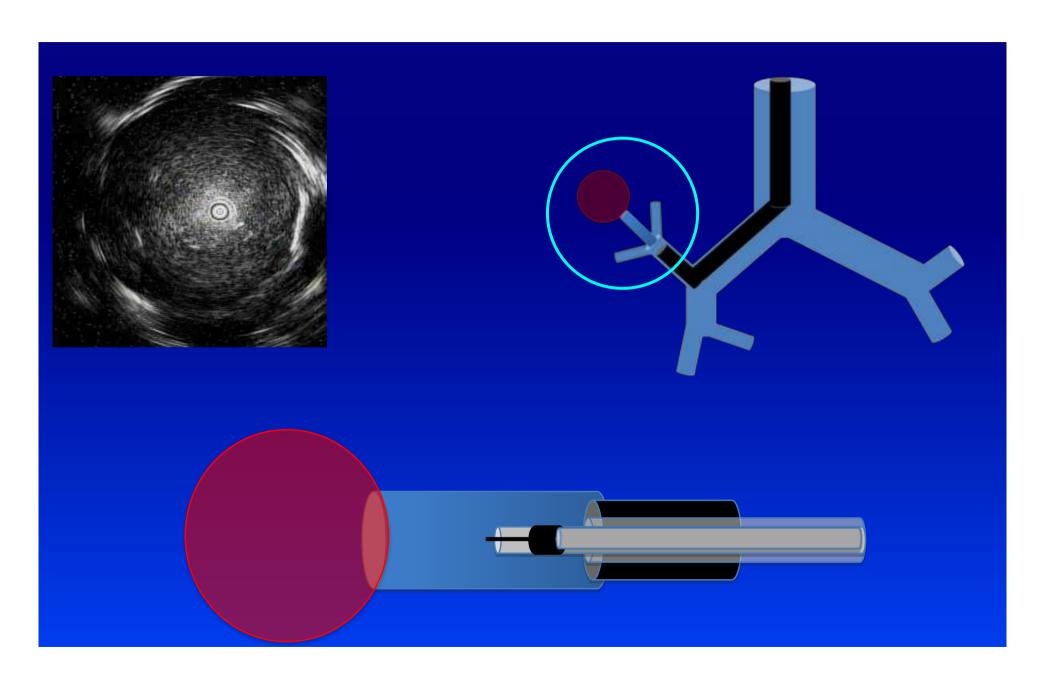
Without needle

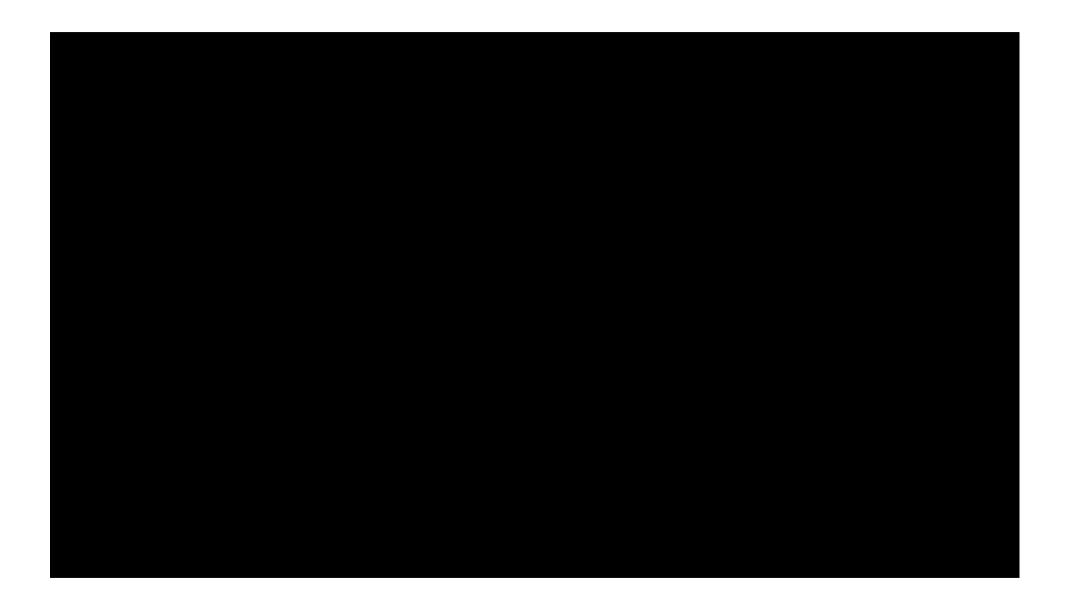
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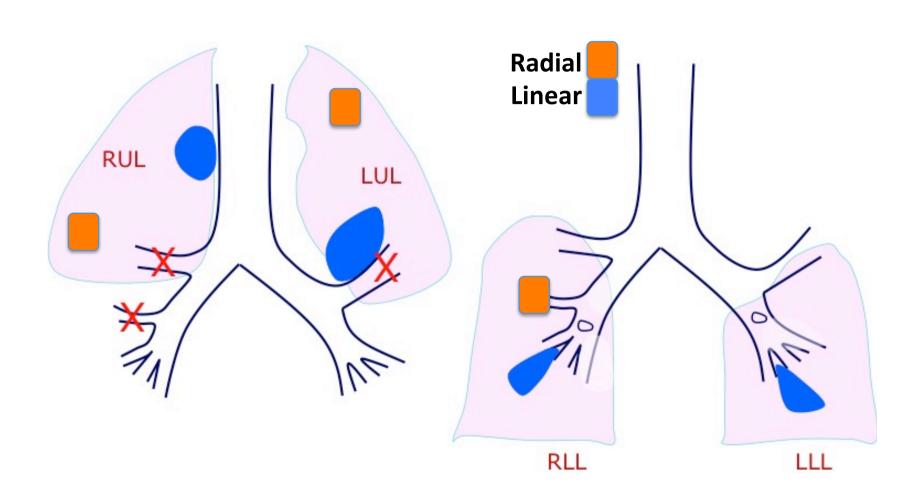
Linear Probe EBUS

Access to LN: 1, 2, 4, 7, 10, 11, 12









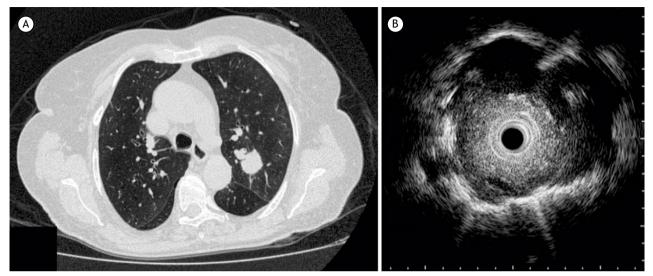


Figure 2. Comparison between CT and radial-probe EBUS: a) CT of the chest, showing a 2.4 cm nodule in the left upper lobe; and (b) radial-probe EBUS image with well-defined, echogenic borders (probe positioned within the lesion). The final diagnosis in this case was non-small cell lung cancer (squamous cell lung carcinoma).

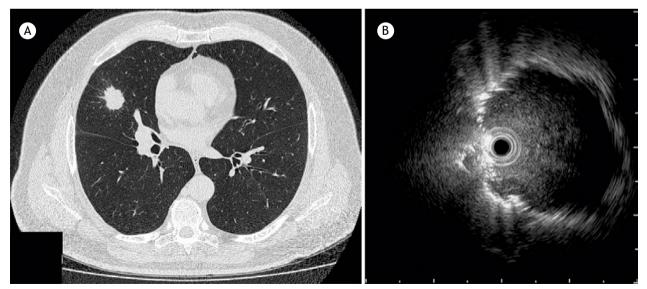
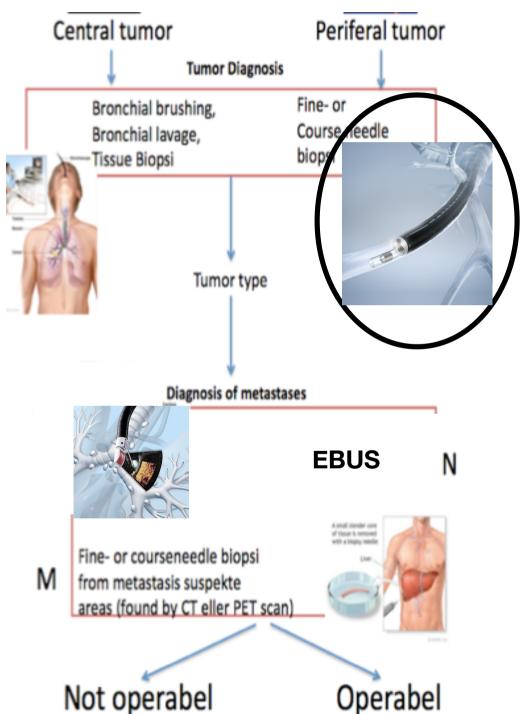


Figure 3. Comparison between CT and radial-probe EBUS: a) CT of the chest, showing a 2.5 cm nodule in the middle lobe; and (b) radial-probe EBUS image with the probe positioned adjacent to the lesion. The final diagnosis in this case was non-small cell lung cancer (adenocarcinoma).



pEBUS

Radial EBUS

Comparative effectiveness of radial probe endobronchial ultrasound versus CT-guided needle biopsy for evaluation of peripheral pulmonary lesions: A randomized pragmatic trial

Daniel P. Steinfort ^{a,b,*}, Janette Vincent ^c, Stefan Heinze ^c, Phillip Antippa ^d, Louis B. Irving ^a

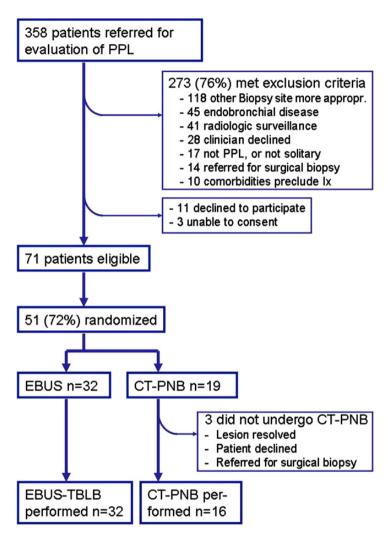


Figure 1 Flow diagram illustrating progression of all patients referred for evaluation of PPL to our multidisciplinary service during the study period.

Respiratory Medicine (2011) 105 1704-1711

	EBUS-TBLB	CT-PNB	<i>p</i> -value
Subjects	32	19	
Age (mean $+$ SD)	71 + 11	67 + 12	0.193
Gender (F/M)	16/16	7/12	0.36
Size ^a (cm)			
Mean	2.8 + 1.4	4.1 + 2.1	0.026
≤2 cm	12	4	
>2 cm	20	12	
Lobar position ^a			
RUL	9	6	NS
RML	2	0	
RLL	5	5	
LUL	10	2	
LLL	6	3	
Distance ^a (cm)			
from pleura	3.2 + 2.5	1.6 + 1.7	0.017
from hilum	4.5 + 2.5	4.9 + 2.5	0.536
pleural contact	4	5	0.138



	EBUS-TBLB	CT-PNB	<i>p</i> -value
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pleural contact	4	5	0.138



	EBUS-TBLB	CT-PNB	<i>p</i> -value
Diagnostic accuracy % (95%CI)	87.5% (71–96)	93.3% (68–99)	1.0
Sensitivity ^a % (95%CI)	86% (68–95)	92% (62-99)	1.0
Complications			
Overall	1 (3%)	4 (27%)	0.03
pneumothorax	1 (3%)	3 (20%)	
admission	0 (0%)	1 (7%)	
ICC	0	0	
deaths	0	0	



Vigtigt

Overflade eller dybt i tumor

Kvæstning (husk PD-L1)

Mængde af materiale (mol. Patologi)

