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**THORACIC
SURGERY**
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11th International Meeting on General Thoracic Surgery
Clínica Barcelona | UNIVERSITAT DE BARCELONA | Hospital Universitari Sagrat Cor

5th Meeting of the Thoracic Oncology, Thoracic Surgery, Techniques & Transplant, Respiratory Nursing and Respiratory Physiotherapy Areas of the Spanish Society of Pneumology and Thoracic Surgery (SEPAR)



10th International Workshop on Surgical Exploration of the Mediastinum and Systematic Nodal Dissection



10th International Workshop on Surgical Exploration of the Mediastinum and Systematic Nodal Dissection
Hospital Universitari Mútua Terrassa | UNIVERSITAT DE BARCELONA

3rd Joint Meeting of the Spanish Society of Thoracic Surgery (SECT)

SECT
SOCIEDAD ESPAÑOLA DE CIRUGÍA TORÁCICA

30th Congress of the "Asociación Iberoamericana de Cirugía Torácica" AIACT



EBUS

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Endobronchial ultrasound-guided transbronchial needle aspiration (EBUS-TBNA) is a minimally invasive procedure for tissue sampling of mediastinal lesions. One important indication is the differentiating between benign and malignant causes of mediastinal lymphadenopathy among patients with extra-thoracic malignancy. It is recommended by guidelines as the technique of choice for the preoperative invasive mediastinal staging of nonsmall cell lung cancer (NSCLC)¹. EBUS-TBNA can provide both a diagnosis and mediastinal lymph node stage for patients with suspected advanced NSCLC.

The diagnostic yield of EBUS-TBNA depends on several factors. So, it is important to have uniform guidelines regarding technical aspects and optimal performance of EBUS-TBNA²⁻⁴. An increase of sensitivity of EBUS-TBNA in mediastinal staging of NSCLC was noted when performing a systematic sampling over a more limited approach⁵⁻⁶. EBUS sampling must be initiated at N3 regions, followed by N2 and N1 regions. There are different studies focused on the use of Rapid On-Site Evaluation (ROSE) in EBUS-TBNA in patients with suspected lung cancer⁷. ROSE is highly concordant with the final diagnosis, and it may reduce the number of additional procedures⁸.

The possibility to perform molecular testing on most cytological samples obtained by EBUS has been demonstrated in several studies⁹⁻¹¹.

In conclusion, EBUS-TBNA is a widely accepted tool for the diagnosis, staging and molecular analysis of lung cancer patients.

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