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Experience of CFBEUS (French-Brazilian Center of EUS) in mediastinum

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Introduction:

Transoesophageal ultrasound (EUS) has been used in the staging of lung cancer and the assessment of mediastinal lymph nodes (LN). The following LN can be detected: paratracheally (station 2L and 4L); subaortic (station 5); lateral to the aorta (station 6); subcarinal space (station 7); adjacent to the oesophagus (station 8); pulmonary ligament (station 9). The aim of this study is to describe our experience with EUS in the mediastinum.

Material and Methods:

The files of 39 patients submitted to a mediastinal EUS in CFBEUS (Santa Casa Hospital, São Paulo) during January 2009 and January 2010 were retrospectively studied.

Results:

Twenty-nine patients were submitted to a mediastinal EUS, twenty men (51,3%) and nineteen women with a mean age of 55.5 years. The most frequent indication was lung cancer (26 cases/67%) followed by mediastinal masses (9 cases/23%) and mediastinal adenopathy (4 cases/10%). Among the mediastinal masses, lymphoma, metastasis of anal carcinoma, metastasis of osteosarcoma, metastasis of glomangiosarcoma and metastasis of thyroid carcinoma were found. In the lung cancer cases, twenty three (88%) were non small cells lung cancer and tree (12%) small cells lung cancer. EUS was able to detect 30 LN at station 7, 20 at station 4L, 10 at station 2, 8 at station 5, 6 at station 9, 5 at station 8 and two metastasis of left adrenal gland and one at the pancreas.

Conclusion:

EUS has proven to be an accurate diagnostic method for the staging of lung cancer and the assessment of mediastinal LN.