

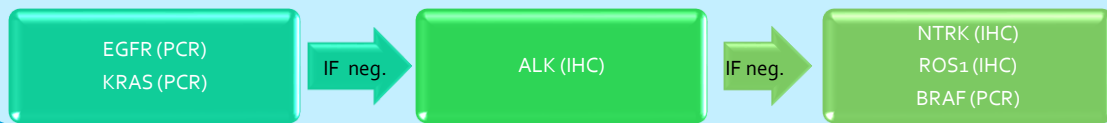
Adequacy of EBUS-TBNA specimens for accurate therapeutic decision



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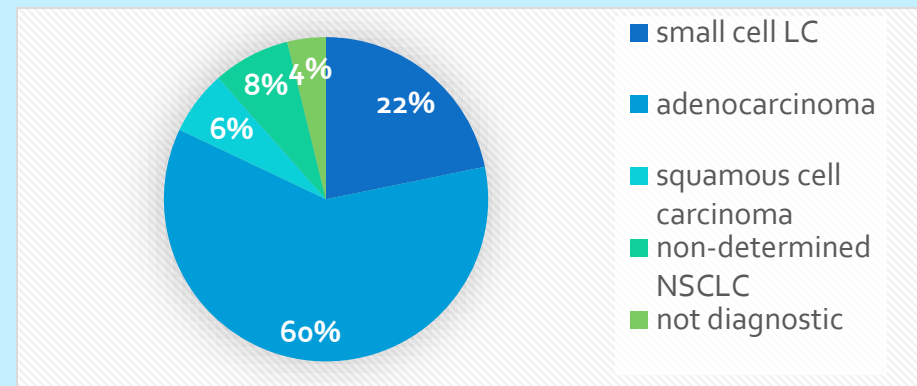
Background. EBUS-TBNA is an important diagnostic tool due to its minimally invasiveness and high accuracy in patients with lung cancer (LC). The aim of this study was to estimate the accuracy of EBUS-TBNA lymph node specimens, obtained from our patients, for a full assessment including immunohistochemistry (IHC) and molecular tests when indicated.

Methods. We retrospectively analysed 78 patients with LC in whom EBUS-TBNA of lymph nodes was performed as a diagnostic procedure from 2019-2021 at University Clinic Golnik. Molecular tests and IHC were performed in sequence listed below and according to the current guidelines.

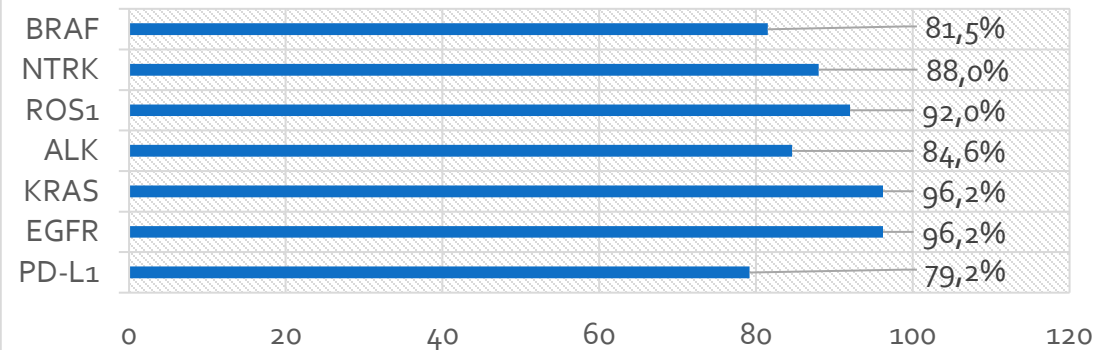


Conclusion. Our data show that EBUS-TBNA provided adequate specimens for therapeutic decision in majority of patients (82.1%), with high success rates in mutational status detection, and a place for improvement in adequacy for PD-L1 assessment.

Results. EBUS-TBNA was diagnostic in 75 (96.2%) patients.



Adequate EBUS-TBNA specimens



In 14 (17.9%) patients further procedure for optimal therapeutic decision was needed.