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Paper 7:

New challenge in double-bore medical thoracoscopy in Fayoum University Hospital

Abstract:

Background: Thoracoscopy is an invasive technique. When other, less intrusive techniques are ineffective at providing a diagnosis in the case of pleural exudates, thoracoscopy should be employed. The diagnostic and therapeutic thoracoscopy methods used by the pulmonologist are divided into two techniques. In the first technique, a single entry site of a thoracoscope together with a working channel for supplementary tools and optical forceps for biopsy is often created. The alternative method employs two entrance points: one is for the examination telescope and the other is for accessory instruments, including the biopsy forceps.

Aim: The aim of this study is to assess the effect of the use of optical rigid bronchoscopy forceps using one entry site instead of two entry sites in double bore medical thoracoscopy.

Results: Thirty patients with undiagnosed pleural effusion underwent medical thoracoscopy by single entry site (procedure A) using optical rigid bronchoscopy forceps and another 30 patients undergone medical thoracoscopy with two entry sites (procedure B). all patients were subjected to history, examination, computed tomography (CT) of chest, ultrasound examination, laboratory tests. The two groups were matched regarding age, sex, smoking, and co morbidities. There were matched regarding radiology, thoracoscopic picture, and pathological diagnosis with same outcomes. The procedure A was short in duration with less postprocedure complications compared with procedure B.

Conclusion: The use of optical rigid bronchoscopy forceps in medical thoracoscopy as a single entry site is valuable in decreasing procedure duration and postprocedure complications in comparison with two entry sites in medical thoracoscopy.

Keywords: double bore, Fayoum, medical thoracoscopy