BRONCHIAL SURGERY: CLINICAL PRESENTATION, DIAGNOSIS, AND SPECIFICS OF ORGAN-SPARING RECONSTRUCTIVE OPERATIONS

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Abstract

This study focuses on the experience of diagnosing and surgically treating bronchial diseases and injuries in 890 patients, comprising 93 children (11%) aged 8 months to 18 years and 775 adults (89%) up to 76 years of age. Among the adult patients, 37% were women and 63% were men.The primary diagnostic methods enabling the planning of reconstructive surgeries included computed tomography (CT), positron emission tomography-computed tomography (PET-CT), and endoscopic and histological (histochemical) examinations of tumors. The vast majority of patients underwent surgery for bronchopulmonary tumors (77.5%), while 22.5% of operations were performed for eight other nosological entities. Isolated bronchial surgeries accounted for 37.9% of cases, while combined bronchial and partial lung resections accounted for 62.1%. Isolated organ-sparing circular and sleeve bronchial resections constituted 84% of the procedures, with five other types of reconstructive surgeries making up the remaining 16%. Among the 553 combined bronchopulmonary resections, lobectomy was the most frequently performed procedure (69%), followed by segmentectomy (15.2%) and combined lung resection (15.8%). Non-standard, complex reconstructive surgeries developed at the clinic were performed on 349 patients (39%). Postoperative mortality was 1.7%.

Keywords: bronchial surgery, clinical presentation, diagnostics, organ-sparing reconstructive operations..

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