

Lung cancer diagnosis tool shown to be safe and effective for older patients

August 4 2014, by Alison Barbuti

A recent study in Manchester has found that a procedure to take tissue samples from lung cancer patients can be used safely in the elderly – allowing doctors to make a more accurate diagnosis and to choose appropriate treatment.

Half of all [lung cancer patients](#) are over 70 years old when first diagnosed, but studies have shown that these older [patients](#) are less likely to receive an accurate diagnosis.

A correct assessment of the stage of a patient's disease – how much their tumour has grown and spread – is key to ensuring they receive the right treatment.

Non-invasive methods of checking whether a patient's [cancer](#) has spread to their lymph nodes have limited sensitivity and until recently the only way to obtain a [tissue sample](#) was under general anaesthetic – limiting its use in elderly patients who often present with other conditions that may restrict the use of general anaesthesia.

Now researchers at University Hospital of South Manchester NHS Foundation Trust and The University of Manchester – part of the Manchester Cancer Research Centre – have looked at a newer technique: endobronchial ultrasound-guided transbronchial needle aspiration (EBUS-TBNA). This method is carried out under sedation while the patient is still conscious and uses ultrasound to guide a sampling needle down and through the airways of the lungs.

Dr Richard Booton, Consultant Respiratory Physician at the North West Lung Centre and senior lecturer at the University's Institute of Inflammation and Repair who led the study, said: "We wanted to see if there were any differences between patients aged less than 70 years old and those older than 70, in terms of both the safety of the technique and how useful it was for diagnosis."

The team recently published their results in the *Journal of Thoracic Oncology* and found that the procedure was well tolerated at all ages – even in those patients aged over 80 years old. They also showed that EBUS-TBNA is effective for assessing whether a patient's tumour had spread to the [lymph nodes](#).

"Being able to safely take tissue samples will also allow us to test for specific tumour sub-types and better decide the most appropriate treatment for each individual patient," added Dr Booton.

More information: "EBUS-TBNA in elderly patients with lung cancer: safety and performance outcomes." Evison et al. *J Thorac Oncol.* 2014 Mar;9(3):370-6. [DOI: 10.1097/JTO.0000000000000085](https://doi.org/10.1097/JTO.0000000000000085)

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