

Efficacy of endobronchial ultrasonography-guided transbronchial needle aspiration in patients with suspected sarcoidosis

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Area and Category(at submission):

[WCBIP] EBUS & EUS

Presentation Preference: Poster

Case Report: NO

Background: Endobronchial ultrasonography-guided transbronchial needle aspiration (EBUS-TBNA) had been developed as a novel diagnostic procedure for mediastinal lymphadenopathy. We began to perform this procedure at our hospital in April 2012.

This study was carried out to evaluate the diagnostic yield of EBUS-TBNA, and transbronchial lung biopsy (TBLB).

Methods: We analyzed patients who underwent diagnostic bronchoscopy for pathological diagnosis of sarcoidosis from September 2010 to October 2013 at our hospital.

Result: Eighteen patients were clinically and histologically diagnosed sarcoidosis. Ten cases were categorized as Stages I, 7 cases were categorized as Stage II, and 1 case was categorized as Stage III. Since April 2012, 4 cases were categorized as stage I, 2 cases were categorized as Stage II, and 1 case was categorized as Stage III. Nine cases were histologically diagnosed by EBUS-TBNA or TBLB, and 5 cases were categorized as Stage I, 3 cases were categorized as Stage II, and 1 case was categorized as Stage III. EBUS-TBNA was performed in 3 cases (all cases are Stage I), and histologically diagnosed in 2 cases (66.7%). TBLB was performed in 6 cases of Stage I, and histologically in diagnosed 2 cases (33.3%). The diagnostic yield of EBUS-TBNA showed no significant difference statistically in comparison with TBLB.

Conclusion: In our study, we could not make sure the advantage of EBUS-TBNA, but tendency to be superior to TBLB in patients with clinical suspicion of sarcoidosis.