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| **Non cancer diagnosis in patients following a lobectomy referred from a lung cancer multidisciplinary team** |
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| **Introduction/Aim:**  This retrospective audit evaluated the histological outcomes of pulmonary resection  (lobectomy) in patients referred from a lung cancer MDT in far north Queensland from 2018 – March 2023, specifically evaluating the incidence of a benign final diagnosis and the histological subtype.  **Methods:**  A retrospective analysis of demographic information, ECOG, smoking history, presurgical workup and post-surgical diagnosis was recorded. The audit reviewed 178 patients considered for resection, with 128 of those undergoing surgery.  **Results:**  In the post resection group, 51.9% were male, with an average age of 63.8 years at time of procedure. The majority of patients were ECOG 0-1, with only four patients  at a score of 2. Smokers and ex-smokers made up 82% (n=105) of patients.  A tissue diagnosis was made in 60 of the 128 patients preoperatively. Preoperative diagnosis was unable to be obtained in a further 17 patients who underwent invasive procedures. Of the 128 patients who underwent thoracic surgery, 83 had a NSCLC diagnosis (64.8%). Adenocarcinoma was the most common (n=57, 68.6%), followed by squamous cell carcinoma (n=19, 22.9%). Metastatic disease was detected in 11 (8.7%) cases.  Benign diagnoses made up 17.3%. Granulomatous or infective disease was found to be the underlying lesion in 9 (7%) cases. Subgroup analysis of non-smokers demonstrated that 21/23 patients undergoing resection were  found to have an underlying cancerous lesion, of which 18/21 (85.7%) were malignant.  **Conclusion:**  Of those patients referred for surgical resection, 90.6% had an underlying malignancy.  Adenocarcinoma of the lung made up the majority of lung cancers resected. A significant proportion of the remainder were found to have granulomatous disease, a difficult to distinguish differential presenting commonly in the North Queensland setting.    **Grant Support:**  Nil |