

SURGICAL RESECTION AS AN EFFECTIVE TREATMENT FOR LUNG METASTASES AND SYNCHRONOUS OR METACHRONOUS LUNG TUMORS.

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Aim:

The aim of the study was to demonstrate the differences in the surgical treatment of multiple lung tumors.

Material and Methods:

The survey group contained 61 patients who underwent twice operations due to lung cancer between 2001-2014. The average age of patients was 67.2 years (+/- 14.8). In group I, in 29 patients occurred pulmonary metastases from a primary lung cancer. In group II, in 32 cases new primary lung cancers were diagnosed. Here metachronous tumors dominated in 26 cases over synchronous-3. The mechanical resection was performed in 67%. The anatomical resections were performed similarly in both groups - 22% of cases. 11% of operations were diagnostic.

Results:

Long-term effects of surgical resection in both groups were comparable. The chance of 5-years survival after metastasis surgery was 53% and after new tumors - 52%. The number of perioperative complications in both groups was 38-39%.

Conclusions:

The diagnosis of lung cancer metastasis is often an indication for mechanical resection.

The new primary lung cancer requires a separate qualification and anatomic resection with lymphadenectomy.

Long-term results of treatment of new primary tumors and secondary are similar, they give a chance for cure for half of the patients, and justify surgical operation.