3.12 2021 Audit of Endobronchial Ultrasound-guided Transbronchial Needle Aspirates in an Irish Lung cancer Tertiary Referral Centre

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Endobronchial ultrasound (EBUS) guided transbronchial needle aspiration is a minimally invasive technique used to investigate mediastinal and hilar lymphadenopathy. This retrospective audit of all EBUS guided samples collected between 1st January and 31st December 2021 assessed the diagnostic yield, adequacy, and malignancy subtypes detected by EBUS and use of rapid on-site evaluation (ROSE) in an Irish tertiary referral center.212 lymph nodes were sampled in 168 EBUS procedures, representing 20% increase from 2020 (140 EBUS). Mean patient age was 60.7 years and 41.4% (69/168) female. ROSE was performed in 89.9% (151/168) of cases, with a positive yield in 84.5% (142/151). Overall inadequacy rate was 6.5 % (5% in 2020).EBUS malignancy rate was 37.5% (63/168) overall and 56% (61/109) in cases of suspected malignancy or staging, with pulmonary adenocarcinoma being the most common subtype (28.6%). Granulomas were observed in 24.4% (41/168) of EBUS procedures overall, and in 69.4% (25/36) of EBUS procedures performed for investigation of sarcoidosis.EBUS is effective for the diagnosis of both malignant and non-malignant disease with excellent adequacy rates and provides source material for molecular analysis. EBUS and malignancy rates increased, while ROSE rates slightly decreased in 2021, and overall inadequacy rate was slight higher.

Conflict of Interest: None to declare