

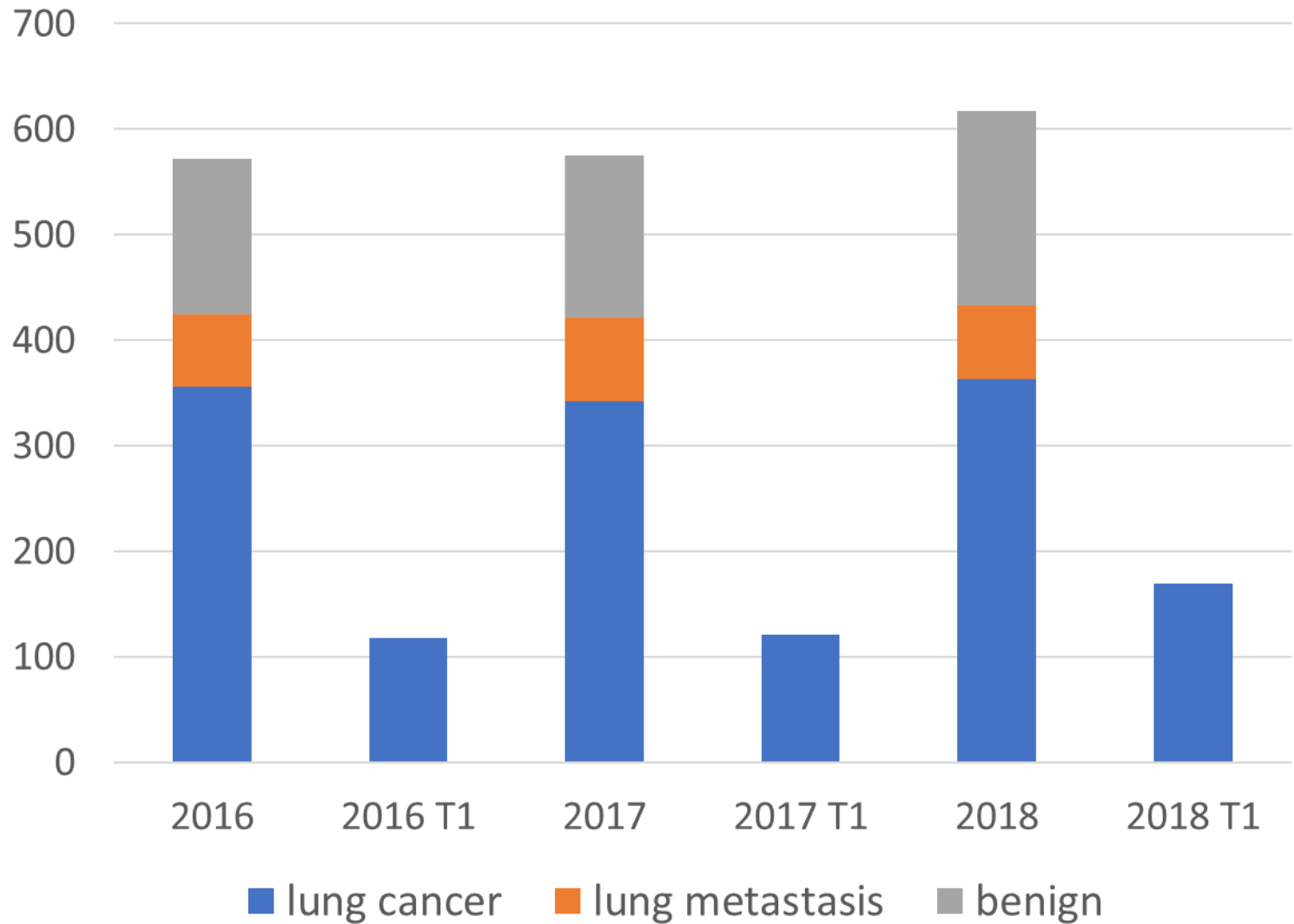


臺中榮民總醫院
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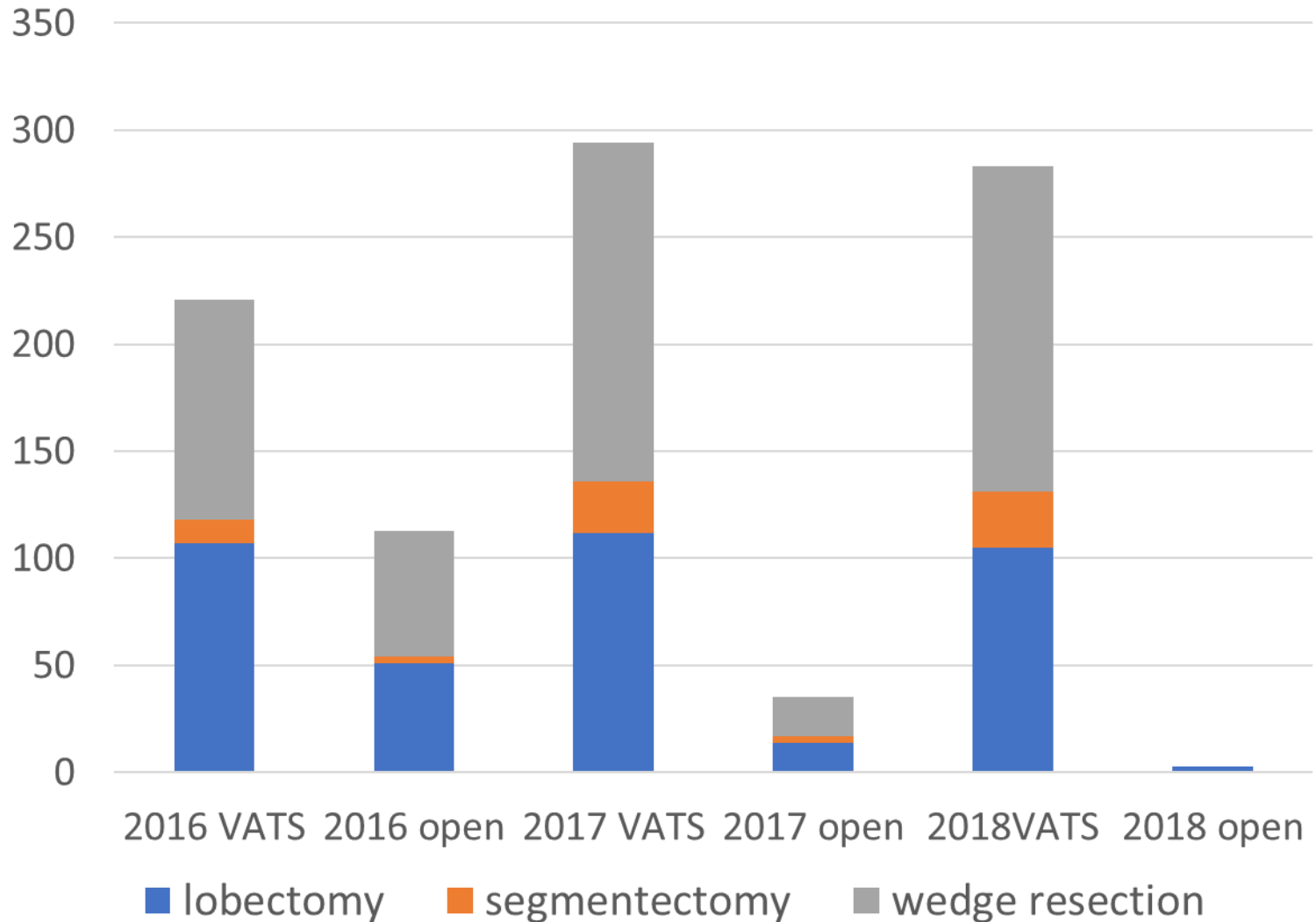
Management of pulmonary nodules 中榮經驗

台中榮總胸腔外科 莊政諺醫師

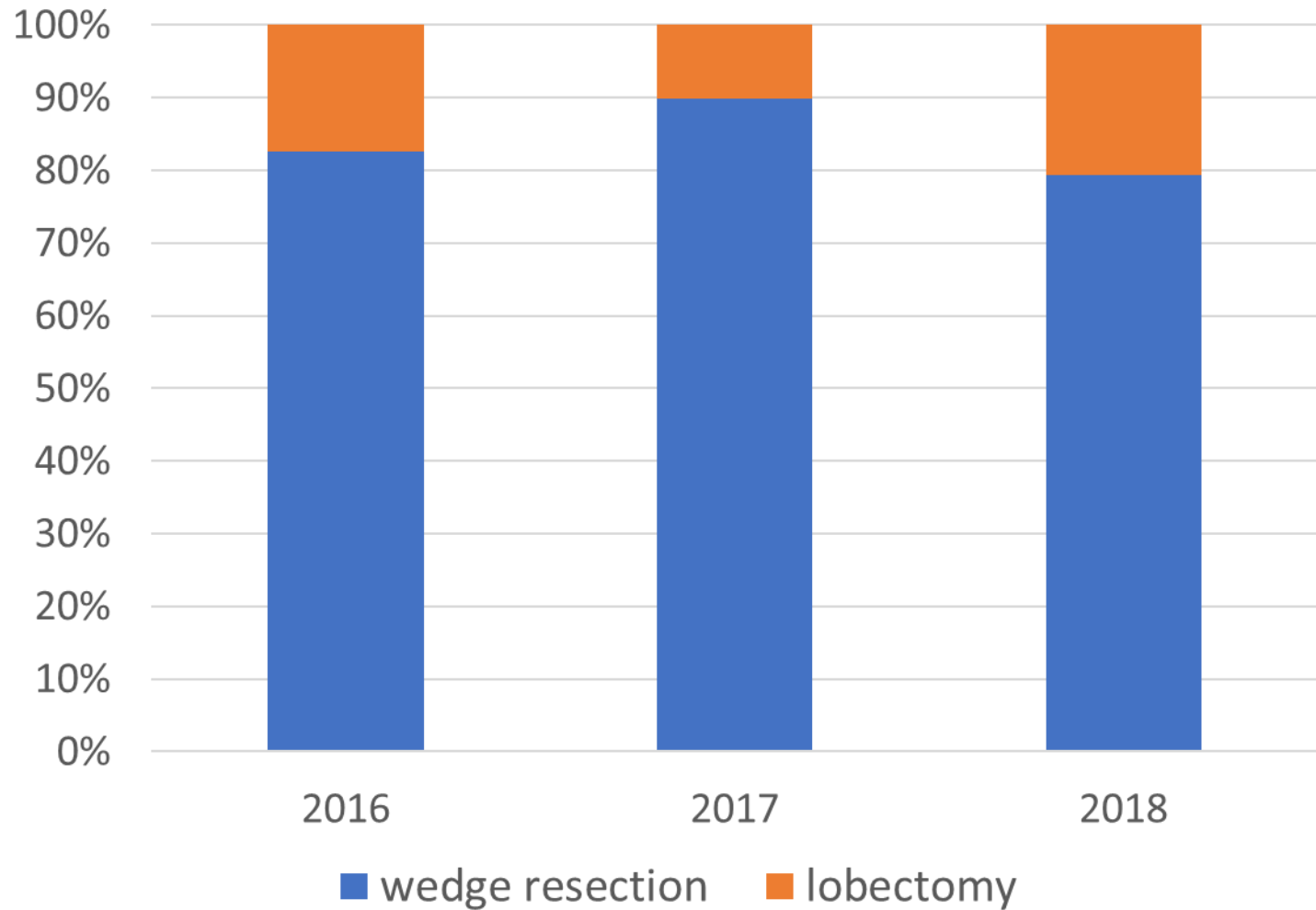
2016-2018 lung surgery



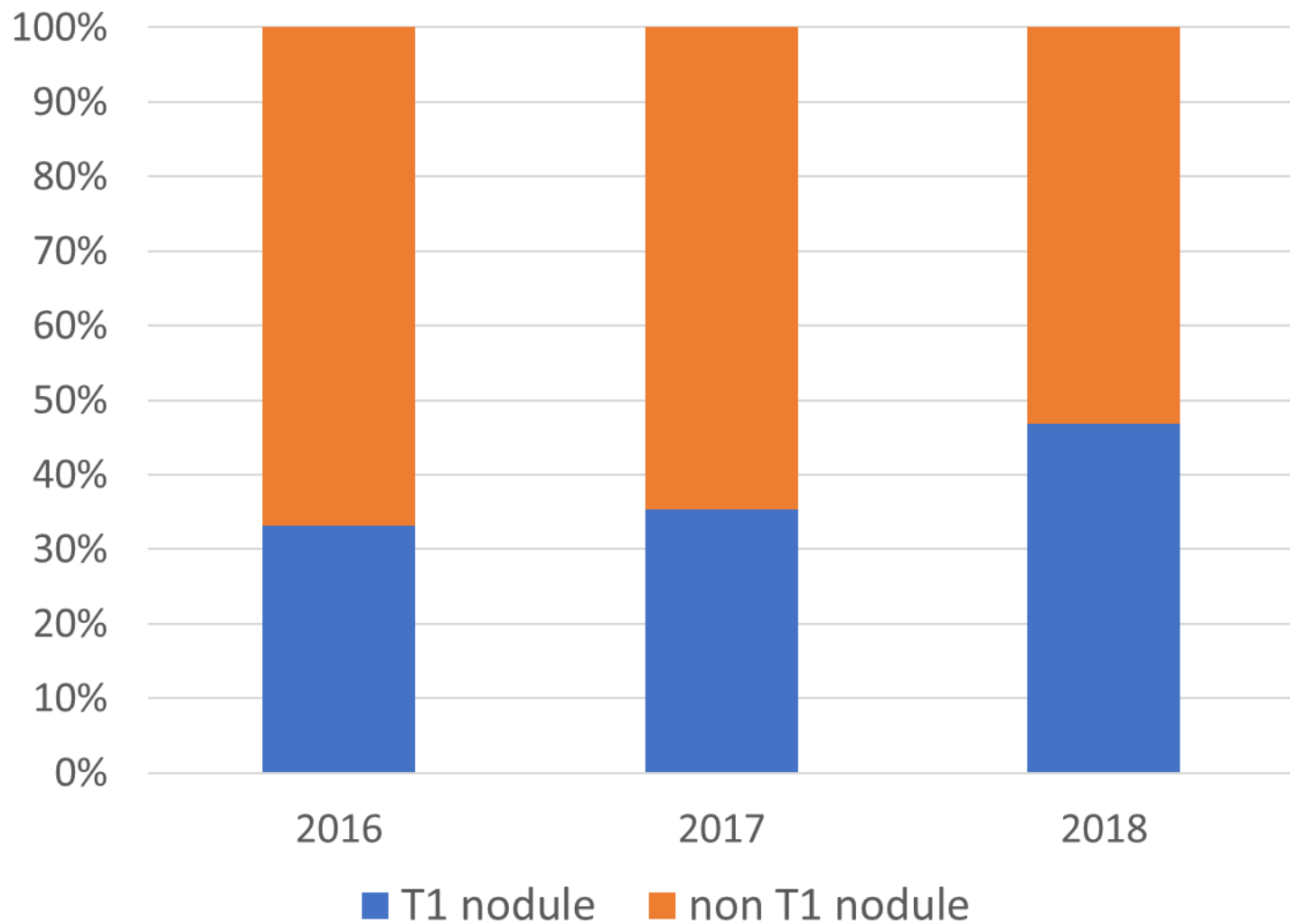
2016-2018 Operation method for lung cancer



Lung metastasis

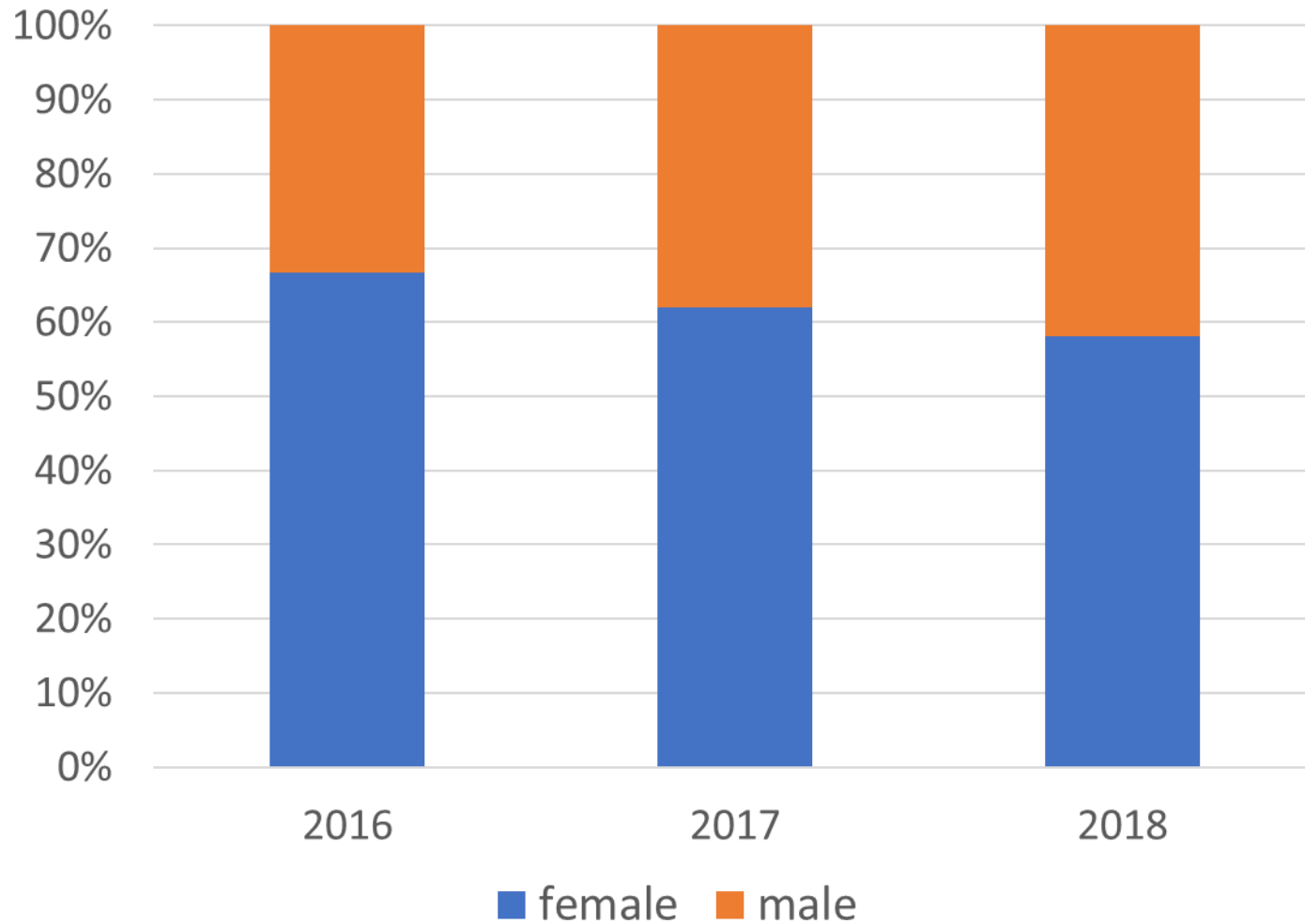


T1 nodule ratio

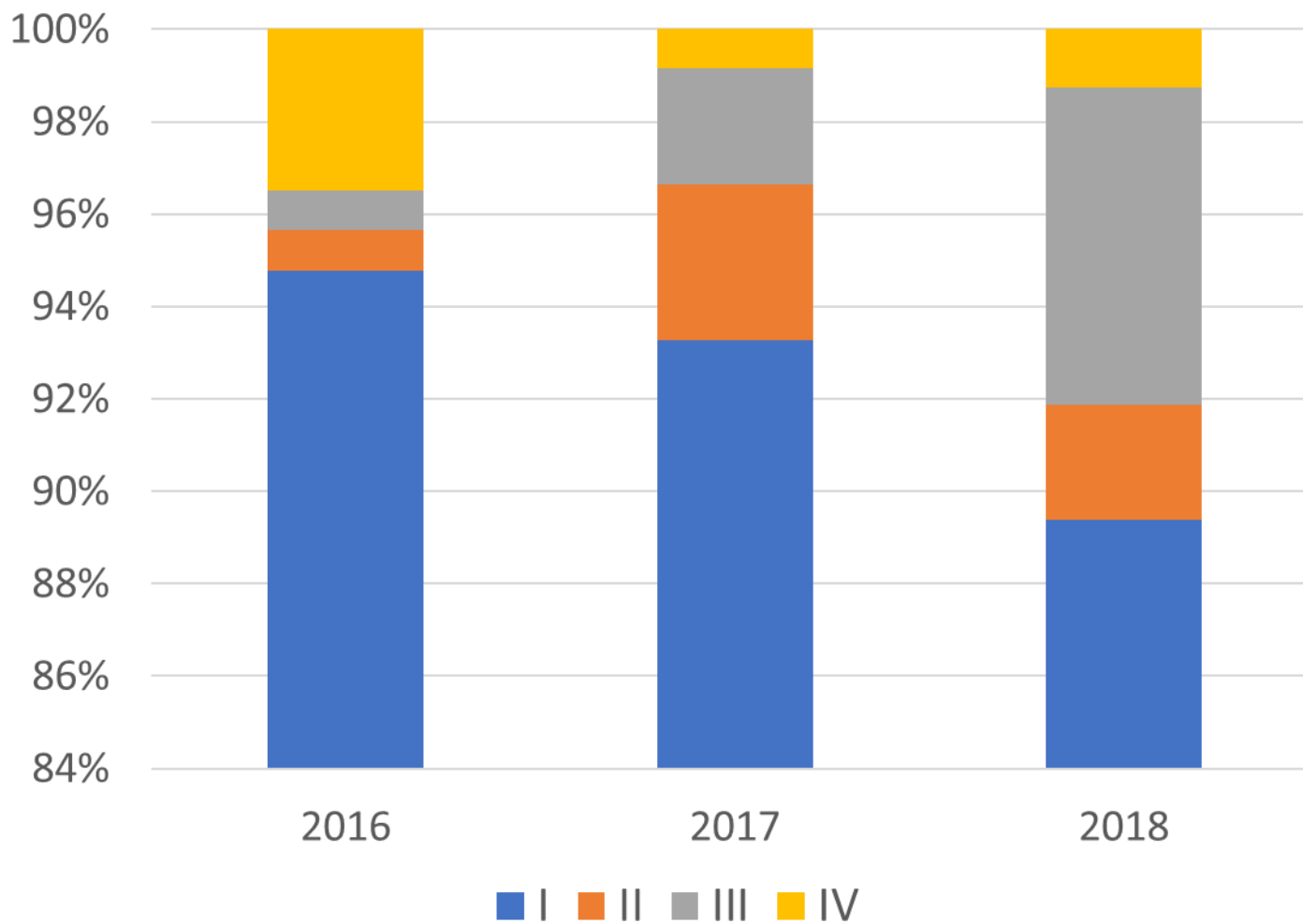


What about the profile of T1 lesion?

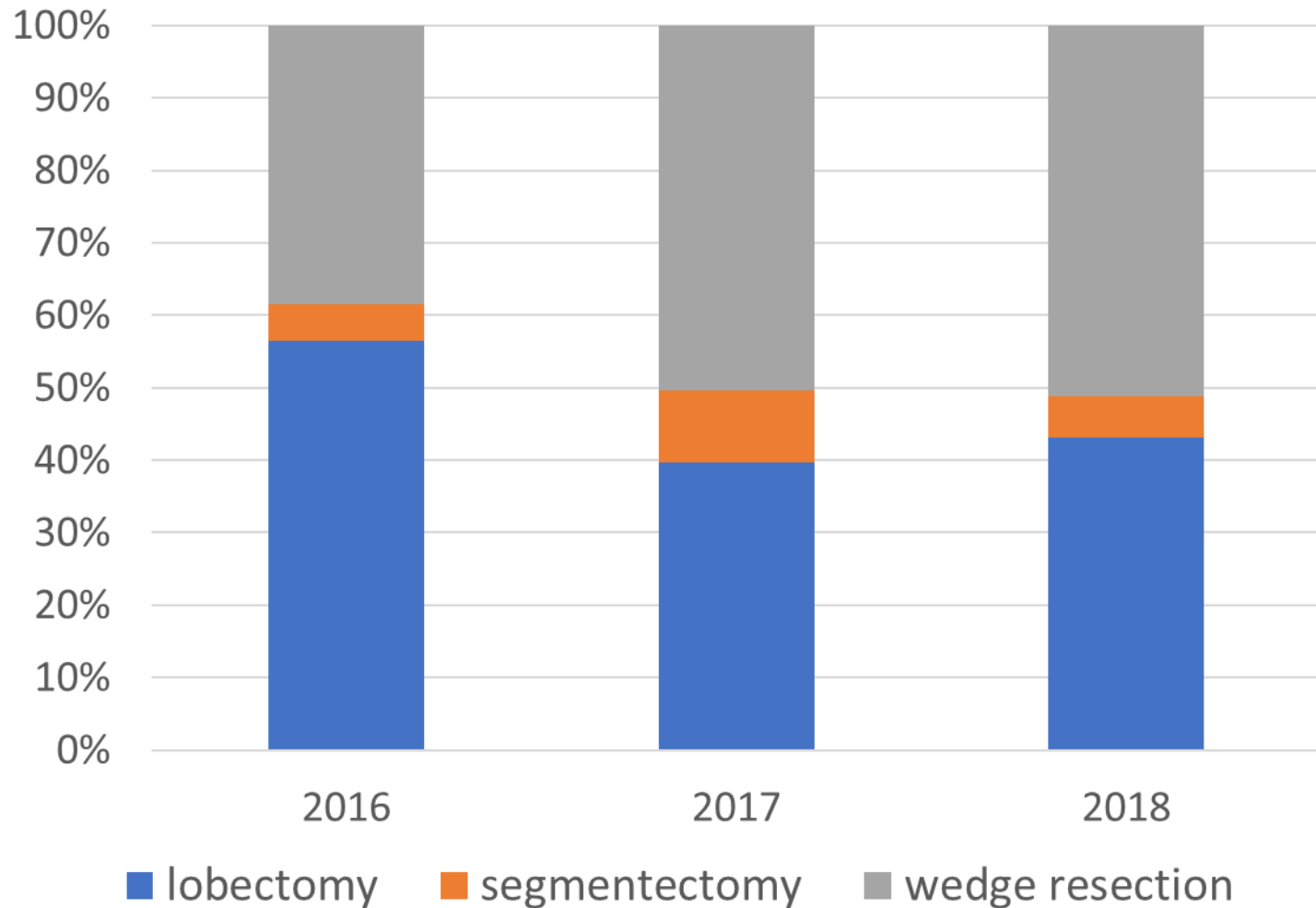
Sex ration of T1 nodule



Stage of TI nodule



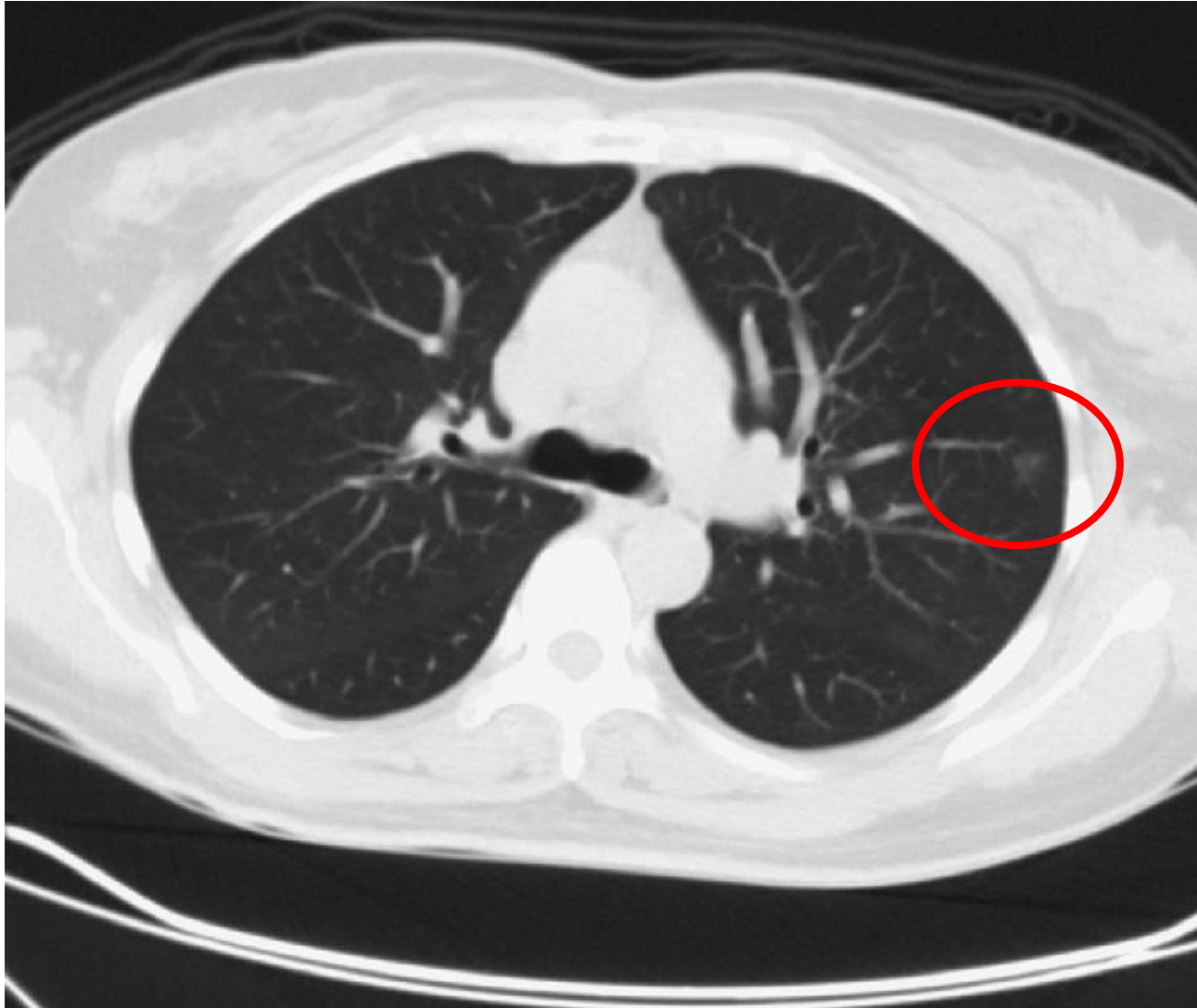
Operation method of T1 nodule



Indications of Sublobar resection

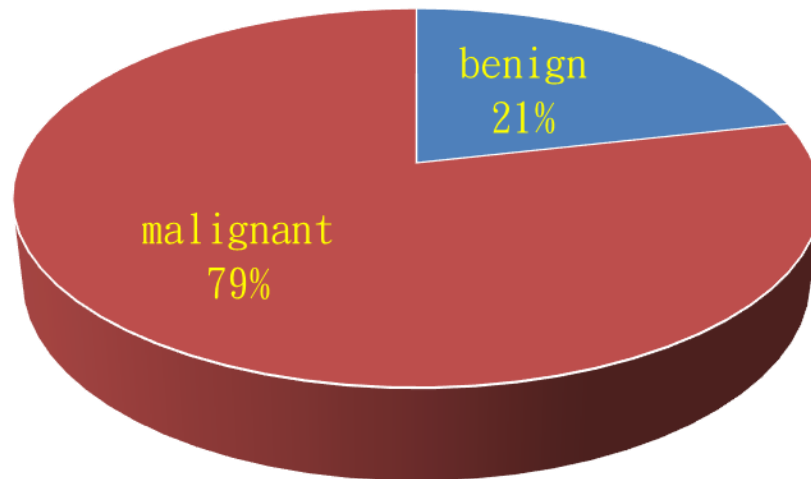
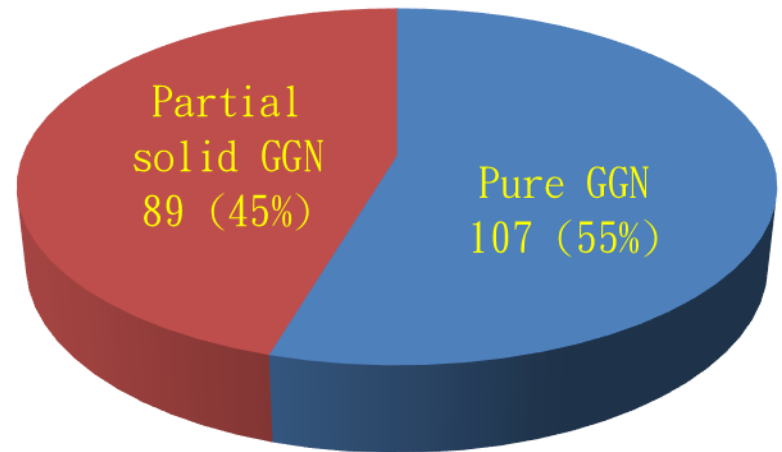
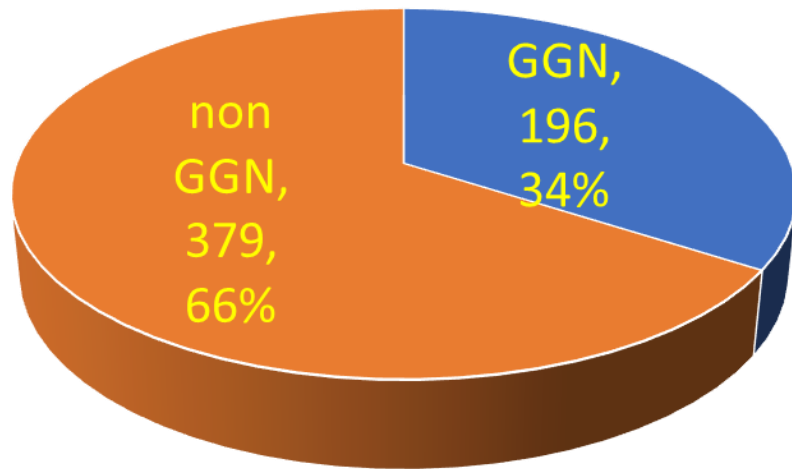
- Limited cardiopulmonary reserve
- Early lung cancer with a predominantly GGO appearance
- Small peripheral nodule

A **ground-glass density nodule (GGN)** is a circumscribed area of increased pulmonary attenuation with preservation of the bronchial and vascular margins

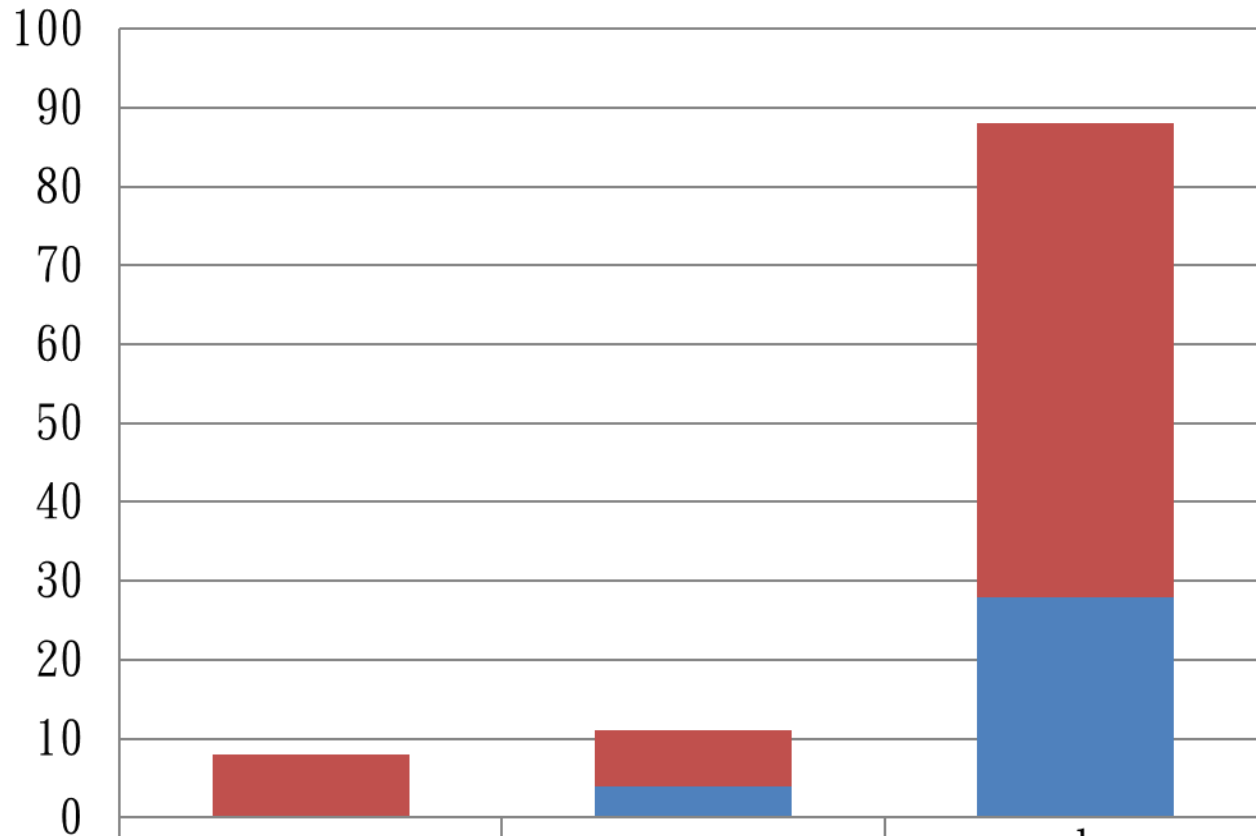


2017 GGN profile

GGN

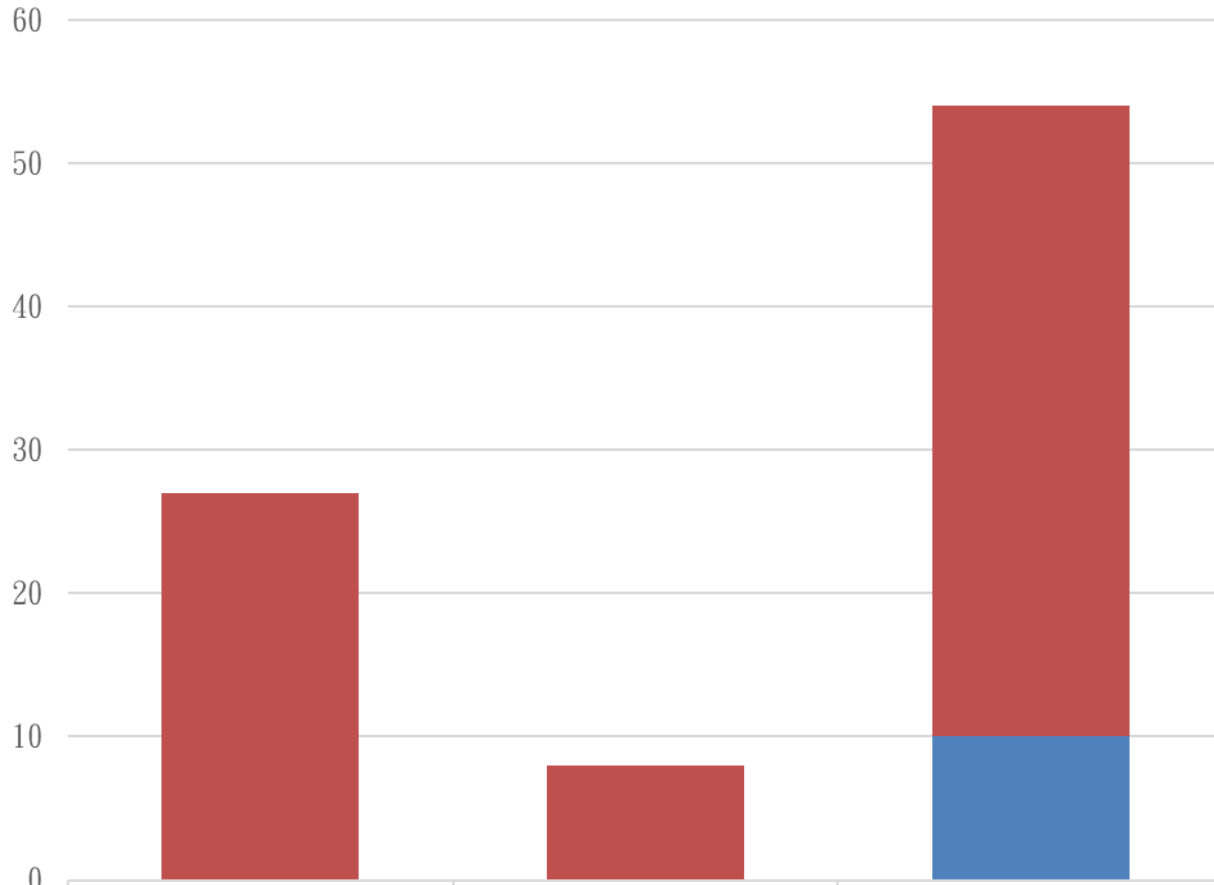


Pure GGN



■ malignant	8	7	60	70%
■ benign	0	4	28	30%
	8%	10%	82%	

Part-solid GGN



■ malignant
■ benign

lobectomy

segmentectomy

wedge resection

30%

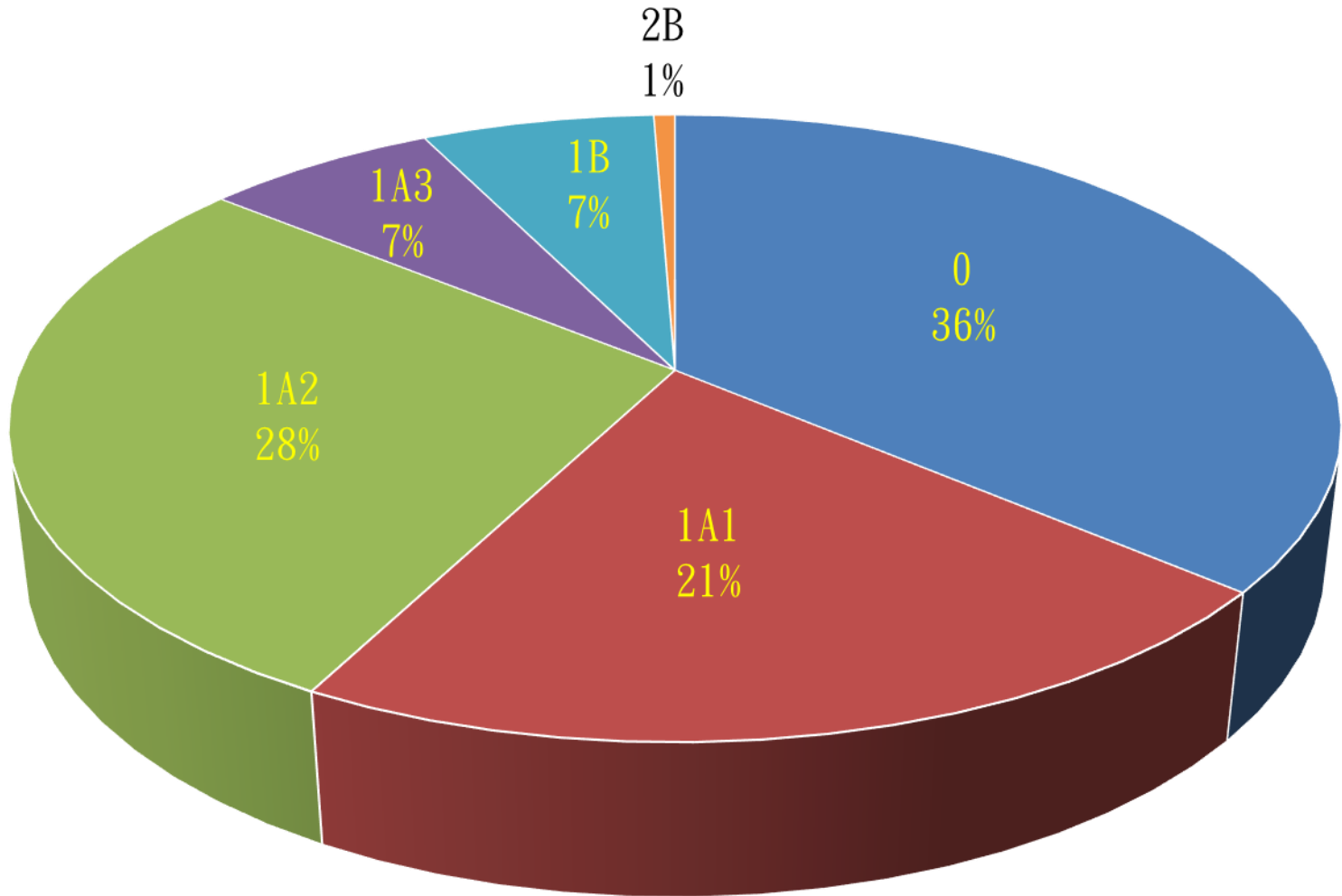
9%

61%

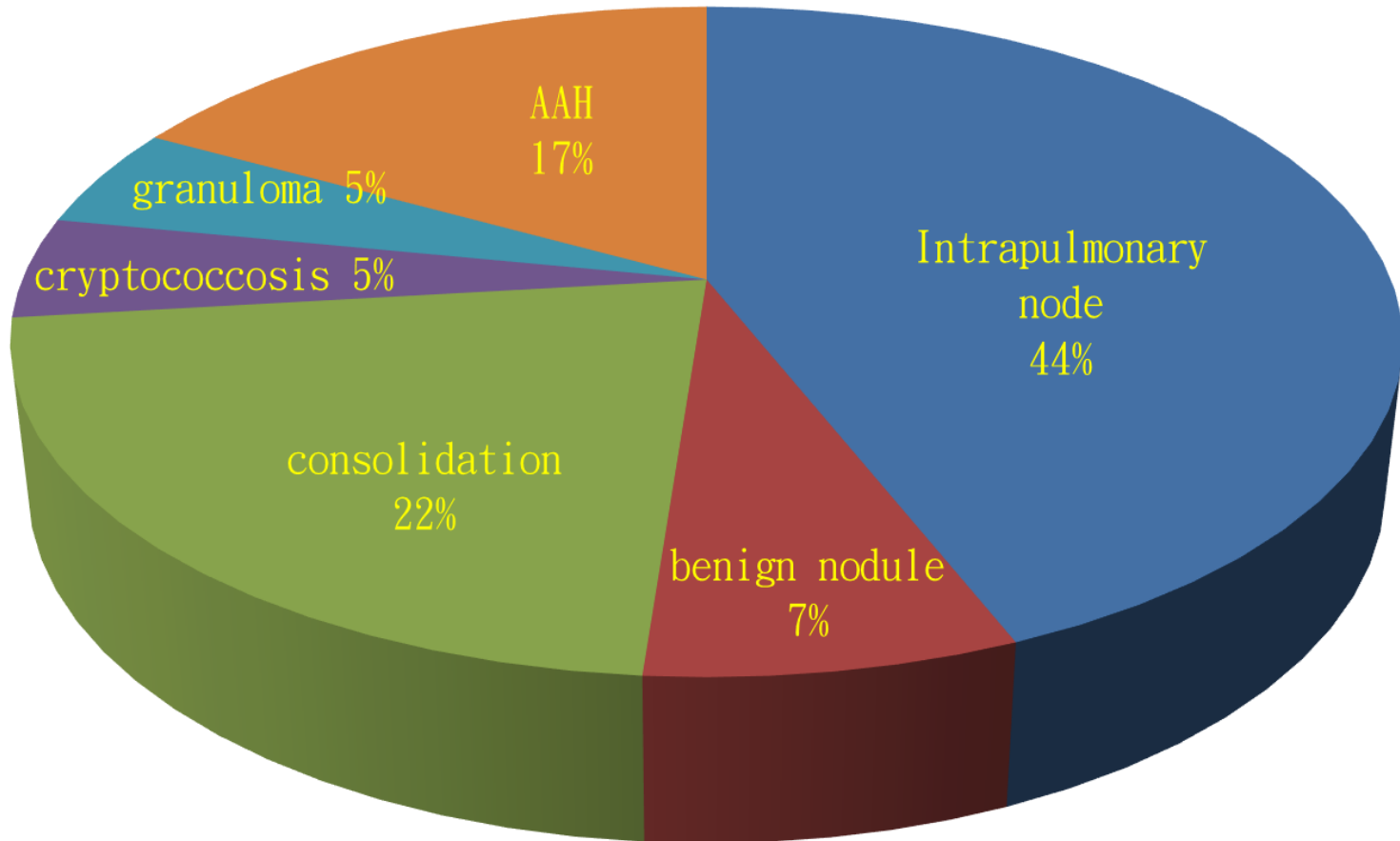
89%

11%

Staging



Benign GGN



Summary

- Pulmonary nodules ratio increased in these years
- Most nodules are stage I lesions (about 90%)
- Sublobar resection increased in these years
- In 2017, GGN had 34% of all lung surgery.
- In surgery of GGNs, 21% were benign lesions.
- Only one part-solid GGN (2.3cm in great diameter) had N1 lymph node metastasis.
- Wedge resection is the most common method for surgery of GGN lesions.



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Thank you !

