



## AB001. Carina resection and reconstruction

Heng Zhao

Shanghai Chest Hospital, Shanghai 200000, China

**Background:** In tracheal tumor and trachea, the incidence of trachea cancer is lower in respiratory diseases, which only accounts for about 2% of the incidence. This type of patient is often encountered clinically. Pathologic processes that involve the carina challenge to thoracic surgeons. Few institutions have accumulated sufficient experience to allow meaningful conclusions about the indications and the morbidity and mortality rates for this type of surgery. The treatment of tumors in the lower trachea and Carina is also a challenge to the decision and judgment of surgeons.

**Methods:** Since 1970, six medical centers of thoracic surgery in China was collected, 275 patients have undergone the resection of the carina and reconstruction. Indications for carinal resection included bronchogenic cancer, pathologically confirmed squamous cell carcinoma of the carina in 183 patients, adenocarcinoma 23 patients, adenoid cystic carcinoma 50 patients, mucoepidermoid carcinoma 19 patients. Carinal resection without pulmonary resection was accomplished in 110 patients; 80 patients had

carinal pneumonectomy; 85 patients had carinal plus lobar resection. There were 10 different modes of reconstruction, based on the type and extent of resection. Techniques were used to reduce anastomotic tension.

**Results:** The operative mortality rate in the 275 patients after primary carinal resection was 10.5%. Adult respiratory distress syndrome was responsible for 29 early deaths. Postoperative anastomotic leakage was in 15 patients, thoracic infection in 9 patients.

**Conclusions:** The surgical resection of the carina tumor and the reconstruction of the carina are the only best method to cure the lower tracheal and carina tumors. The procedure is based on the patient's lesion location, size, range and experience of the surgeon. Careful patient selection and meticulous anesthetic and surgical technique remain the key to minimizing morbidity and mortality rates. The operation of respiratory management and the good coordination with the anesthesiologist is the key to successful surgery, carina surgery for patients with greater trauma, postoperative complications and death of higher risk, surgical reconstruction techniques and postoperative management is particularly important.

**Keywords:** Carina tumor; resection; reconstruction

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