



AB004. OA01.04: Predictors of occult pleural dissemination detected intraoperatively in patients with thymic tumors

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Background: Thymic tumors are usually presented with adjacent organ invasion or pleural dissemination, but very few studies have been reported on occult pleural dissemination detected intraoperatively. The objective of this study was to investigate risk factors that predict pleural dissemination preoperatively.

Methods: Consecutive patients with thymic tumors who underwent surgery from January 2010 to January 2017 were reviewed. Only patients without pleural dissemination detected preoperatively were included in this study. Demographic, clinical, and pathologic data were collected

for statistical analysis. Univariate and multivariate analysis were performed to find the risk factors of occult pleural dissemination.

Results: Three hundred and fifty-nine patients with thymic tumors were included in this study. Fourteen patients were detected with pleura dissemination intraoperatively. Univariate predictors of pleural dissemination were high clinical T stage ($P=0.001$), World Health Organization type B2/B3/C and carcinoma ($P<0.001$). For patient with clinical T1–3 thymic tumors, all the cases of pleura dissemination underwent VATS approach (or VATS explore). Tiny nodules close to the diaphragm were detected in the CT scan in two cases after reviewed the image data. However, no risk factors with statistics significance were observed in the multivariable model.

Conclusions: Due to the low incidence of occult pleural dissemination, risk factors with statistics significance for these patients were not detected in this study. However, VATS approach (including VATS explore) was suggested for patient with clinical stage higher than T1, World Health Organization type B2/B3/C and carcinoma thymic tumor according to our study.

Keywords: Risk factors; VATS; pleura dissemination; thymic tumors

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