

**1. Funktionelle, präoperative Abklärung**

- 1.1. Die postoperative Diffusionskapazität kann nur ungenau kalkuliert werden

Brunelli A, Refai M, Salati M et al. Predicted versus observed FEV1 and DLCO after major lung resection: a prospective evaluation at different postoperative periods. *Ann Thorac Surg* 2007; 83(3):1134-1139.

- 1.2. Beeinflusst eine präoperative Chemotherapie das Operationsrisiko bei Pneumonektomie?

Leo F, Solli P, Veronesi G et al. Does chemotherapy increase the risk of respiratory complications after pneumonectomy? *J Thorac Cardiovasc Surg* 2006; 132(3):519-523.

**2. Lungenkarzinom****2.1. Staging**

- 2.1.1. Wertigkeit der endoskopischen ultraschallgesteuerten Feinnadelaspiration bei Lymphknoten-Staging des Lungenkarzinoms

Herth FJ, Eberhardt R, Vilmann P et al. Real-time endobronchial ultrasound guided transbronchial needle aspiration for sampling mediastinal lymph nodes. *Thorax* 2006; 61(9):795-798.

Micames CG, McCrory DC, Pavey DA et al. Endoscopic ultrasound-guided fine-needle aspiration for non-small cell lung cancer staging: A systematic review and metaanalysis. *Chest* 2007; 131(2):539-548.

- 2.1.2. Notwendigkeit der Routine-Mediastinoskopie oder endoesophagealem Ultraschall bei Patienten mit negativem PET-CT

Cerfolio RJ, Bryant AS, Eloubeidi MA. Routine mediastinoscopy and esophageal ultrasound fine-needle aspiration in patients with non-small cell lung cancer who are clinically N2 negative: a prospective study. *Chest* 2006; 130(6):1791-1795.

- 2.1.3. Wertigkeit des PET für das mediastinale Lymphknotenstaging

Bryant AS, Cerfolio RJ, Klemm KM et al. Maximum standard uptake value of mediastinal lymph nodes on integrated FDG-PET-CT predicts pathology in patients with non-small cell lung cancer. *Ann Thorac Surg* 2006; 82(2):417-422.

Lee BE, von Haag D, Lown T et al. Advances in positron emission tomography technology have increased the need for surgical staging in non-small cell lung cancer. *J Thorac Cardiovasc Surg* 2007; 133(3):746-752.

**2.2. OP-Indikation**

- 2.2.1. Sind Lungenresektionen bei Patienten mit Leberzirrhose vertretbar?

Iwasaki A, Shirakusa T, Okabayashi K et al. Lung cancer surgery in patients with liver cirrhosis. *Ann Thorac Surg* 2006; 82(3):1027-1032.

**2.3. OP-Technik**

- 2.3.1. Zeitpunkt der Drainageentfernung nach minimal invasiven thoraxchirurgischen Eingriffen

Sienel W, Mueller J, Eggeling S et al. [Early chest tube removal after video-assisted thoracoscopic surgery. Results of a prospective randomized study]. *Chirurg* 2005; 76(12):1155-1160.

- 2.3.2. Thorakoskopische videoassistierte Operationen bei Lungenkarzinomen

- 2.3.2.1. Ergebnisse der videoassistierten Resektion im Vergleich zur offenen Operation

Onaitis MW, Petersen RP, Balderson SS et al. Thoracoscopic lobectomy is a safe and versatile procedure: experience with 500 consecutive patients. *Ann Surg* 2006; 244(3):420-425.

Shigemura N, Akashi A, Funaki S et al. Long-term outcomes after a variety of video-assisted thoracoscopic lobectomy approaches for clinical stage IA lung cancer: a multi-institutional study. *J Thorac Cardiovasc Surg* 2006; 132(3):507-512.

Whitson BA, Andrade RS, Boettcher A et al. Video-assisted thoracoscopic surgery is more favorable than thoracotomy for resection of clinical stage I non-small cell lung cancer. *Ann Thorac Surg* 2007; 83(6):1965-1970.

#### 2.3.2.2. Einfluss der videoassistierten Operation auf die Häufigkeit von postoperativem Vorhofflimmern

Park BJ, Zhang H, Rusch VW et al. Video-assisted thoracic surgery does not reduce the incidence of postoperative atrial fibrillation after pulmonary lobectomy. *J Thorac Cardiovasc Surg* 2007; 133(3):775-779.

#### 2.3.2.3. Erleichtert eine thorakoskopische Resektion eine adjuvante Chemotherapie?

Petersen RP, Pham D, Burfeind WR et al. Thoracoscopic lobectomy facilitates the delivery of chemotherapy after resection for lung cancer. *Ann Thorac Surg* 2007; 83(4):1245-1249.

#### 2.3.3. Verschluss von postoperativen Luftleckagen mit autologem Blut

Andreotti C, Venuta F, Anile M et al. Pleurodesis with an autologous blood patch to prevent persistent air leaks after lobectomy. *J Thorac Cardiovasc Surg* 2007; 133(3):759-762.

Droghetti A, Schiavini A, Muriana P et al. Autologous blood patch in persistent air leaks after pulmonary resection. *J Thorac Cardiovasc Surg* 2006; 132(3):556-559.

Shackcloth MJ, Poullis M, Jackson M et al. Intrapleural instillation of autologous blood in the treatment of prolonged air leak after lobectomy: a prospective randomized controlled trial. *Ann Thorac Surg* 2006; 82(3):1052-1056.

### 2.4. OP-Ergebnisse

#### 2.4.1. Bedeutung von postoperativen Luftleckagen für den postoperativen Verlauf

Brunelli A, Xiume F, Al Refai M et al. Air leaks after lobectomy increase the risk of empyema but not of cardiopulmonary complications: a case-matched analysis. *Chest* 2006; 130(4):1150-1156.

#### 2.4.2. Langzeitergebnisse der Resektion bei Patienten mit Tumoren > 1 cm

Lee PC, Korst RJ, Port JL et al. Long-term survival and recurrence in patients with resected non-small cell lung cancer 1 cm or less in size. *J Thorac Cardiovasc Surg* 2006; 132(6):1382-1389.

#### 2.4.3. Chirurgische Resektion von Lungenkarzinomen bei Patienten älter 80 Jahre

Cerfolio RJ, Bryant AS. Survival and outcomes of pulmonary resection for non-small cell lung cancer in the elderly: a nested case-control study. *Ann Thorac Surg* 2006; 82(2):424-429.

Dominguez-Ventura A, Allen MS, Cassivi SD et al. Lung cancer in octogenarians: factors affecting morbidity and mortality after pulmonary resection. *Ann Thorac Surg* 2006; 82(4):1175-1179.

### 2.5. Multimodale Therapie

#### 2.5.1. Neues Therapiekonzept bei Pancoast-Tumoren

Marra A, Eberhardt W, Pottgen C et al. Induction chemotherapy, concurrent chemoradiation and surgery for Pancoast tumour. *Eur Respir J* 2007; 29(1):117-126.

Rusch VW, Giroux DJ, Kraut MJ et al. Induction chemoradiation and surgical resection for superior sulcus non-small-cell lung carcinomas: long-term results of Southwest Oncology Group Trial 9416 (Intergroup Trial 0160). *J Clin Oncol* 2007; 25(3):313-318.

#### 2.5.2. Multimodale Therapie bei Stadium IIIA N2 Lungenkarzinomen

Johnson DH, Rusch VW, Turrisi AT. Scalpels, beams, drugs, and dreams: challenges of stage IIIA-N2 non-small-cell lung cancer. *J Natl Cancer Inst* 2007; 99(6):415-418.

Leo F, De Pas T, Catalano G et al. Re: Randomized controlled trial of resection versus radiotherapy after induction chemotherapy in stage IIIA-N2 non small-cell lung cancer. *J Natl Cancer Inst* 2007; 99(15):1210-1211.

Stoelben E, Digel W, Henke M et al. [Multimodal treatment of non small cell lung cancer]. *Zentralbl Chir* 2006; 131(2):110-114.

Van Meerbeeck JP, Kramer GW, Van Schil PE et al. Randomized controlled trial of resection versus radiotherapy after induction chemotherapy in stage IIIA-N2 non-small-cell lung cancer. *J Natl Cancer Inst* 2007; 99(6):442-450.

Vansteenkiste J, Betticher D, Eberhardt W et al. Randomized controlled trial of resection versus radiotherapy after induction chemotherapy in stage IIIA-N2 non-small cell lung cancer. *J Thorac Oncol* 2007; 2(8):684-685.

## 2.6. Limitierte Resektionen

Sienel W, Stremmel C, Kirschbaum A et al. Frequency of local recurrence following segmentectomy of stage IA non-small cell lung cancer is influenced by segment localisation and width of resection margins - implications for patient selection for segmentectomy. *Eur J Cardiothorac Surg* 2007; 31(3):522-528.

## 2.7. Screening

Henschke CI, Yankelevitz DF, Libby DM et al. Survival of patients with stage I lung cancer detected on CT screening. *N Engl J Med* 2006; 355(17):1763-1771.

Henschke CI, Yankelevitz DF, Yip R et al. CT screening for lung cancer: individualizing the benefit of the screening. *Eur Respir J* 2007;30:843-847.

## 3. Lungenmetastasen

### 3.1. Lungenmetastasenresektion verbessert Überleben auch bei malignem Melanom

Petersen RP, Hanish SI, Haney JC et al. Improved survival with pulmonary metastasectomy: an analysis of 1720 patients with pulmonary metastatic melanoma. *J Thorac Cardiovasc Surg* 2007; 133(1):104-110.

## 4. Pleuramesotheliom

### 4.1. PET als Prognosefaktor bei malignem Pleuramesotheliom

Flores RM, Akhurst T, Gonen M et al. Positron emission tomography predicts survival in malignant pleural mesothelioma. *J Thorac Cardiovasc Surg* 2006; 132(4):763-768.

## 5. Seltene Tumore

### 5.1. BALT-Lymphome

Vanden Eynden F, Fadel E, de Perrot M et al. Role of surgery in the treatment of primary pulmonary B-cell lymphoma. *Ann Thorac Surg* 2007; 83(1):236-240.

### 5.2. Chirurgische Therapieoptionen bei lokal fortgeschrittenem Thymom (Masaoka, Stadium IV)

Wright CD. Pleuropneumonectomy for the treatment of Masaoka stage IVA thymoma. *Ann Thorac Surg* 2006; 82(4):1234-1239.

### 5.3. Solitäre fibröse Pleuratumore

Kohler M, Clarenbach CF, Kestenholz P et al. Diagnosis, treatment and long-term outcome of solitary fibrous tumours of the pleura. *Eur J Cardiothorac Surg* 2007; 32(3):403-408.

## 6. Pleuraerkrankung / Pneumothorax / Empyem

### 6.1. Erfolgreiche Therapie durch videoassistierte Talkumpoudrage bei Leberzirrhose

Cerfolio RJ, Bryant AS. Efficacy of video-assisted thoracoscopic surgery with talc pleurodesis for porous diaphragm syndrome in patients with refractory hepatic hydrothorax. *Ann Thorac Surg* 2006; 82(2):457-459.

## 6.2. Management des Pneumothorax bei Lymphangioliomyomatose

Almoosa KF, Ryu JH, Mendez J et al. Management of pneumothorax in lymphangioliomyomatosis: effects on recurrence and lung transplantation complications. *Chest* 2006; 129(5):1274-1281.

## 6.3. Spontanes Pneumomediastinum: Konservative Therapie ist ausreichend

Macia I, Moya J, Ramos R et al. Spontaneous pneumomediastinum: 41 cases. *Eur J Cardiothorac Surg* 2007; 31(6):1110-1114.

Mondello B, Pavia R, Ruggeri P et al. Spontaneous pneumomediastinum: experience in 18 adult patients. *Lung* 2007; 185(1):9-14.

## 7. Trachea

### 7.1. Management von intubationsinduzierten tracheobronchialen Verletzungen

Conti M, Pougéoise M, Wurtz A et al. Management of postintubation tracheobronchial ruptures. *Chest* 2006; 130(2):412-418.

## 8. Lungentransplantation

### 8.1. Hämoptysen nach Lungentransplantation

Plantier L, Mal H, Brugiere O et al. Hemoptysis in lung transplant recipients: a series of 15 cases. *Chest* 2006; 129(6):1715-1718.

### 8.2. Langzeitergebnisse nach Lungen-Retransplantation

Keshavjee S. Retransplantation of the lung comes of age. *J Thorac Cardiovasc Surg* 2006; 132(2):226-228.

Strueber M, Fischer S, Gottlieb J et al. Long-term outcome after pulmonary retransplantation. *J Thorac Cardiovasc Surg* 2006; 132(2):407-412.

## 9. Zwerchfell

### 9.1. Chirurgische Zwerchfellplikation bei Patienten mit Zwerchfellparese

Versteegh MI, Braun J, Voigt PG et al. Diaphragm plication in adult patients with diaphragm paralysis leads to long-term improvement of pulmonary function and level of dyspnea. *Eur J Cardiothorac Surg* 2007; 32(3):449-456.

## 10. Varia

### 10.1. Einfluss der Operationsfrequenz auf die OP-Mortalität und das Langzeitüberleben bei Lungenkrebs

Birkmeyer JD, Sun Y, Wong SL et al. Hospital volume and late survival after cancer surgery. *Ann Surg* 2007; 245(5):777-783.

Lien YC, Huang MT, Lin HC. Association between surgeon and hospital volume and in-hospital fatalities after lung cancer resections: the experience of an Asian country. *Ann Thorac Surg* 2007; 83(5):1837-1843.

### 10.2. Frauen haben ein besseres Überleben bei Lungenkrebs als Männer

Cerfolio RJ, Bryant AS, Scott E et al. Women with pathologic stage I, II, and III non-small cell lung cancer have better survival than men. *Chest* 2006; 130(6):1796-1802.