

Patient Information on Endobronchial Treatments

DEPARTMENT OF THORACIC MEDICINE
University College Hospital
4th Floor East
250 Euston Road
London NW1 2PG
Fax 0203 44 79476
web www.uclh.nhs.uk

Introduction

This leaflet is intended to give you an idea of the treatment that you will be receiving here at University College Hospital. We think it likely that the tumour involving your lungs is narrowing one of the large airways within your chest. If this is the case, it will explain why you are breathless, wheezing and coughing. The intention of your treatment is to relieve this blockage and so make you feel better.

Treatment is given in one of three ways. Firstly, it is possible to remove tumour sitting inside the air passage by burning it with a laser. Secondly, it is possible to relieve the blockage in your airway by inserting a hollow tubular support, known as a stent, into the airway, which will hold the airway open. Thirdly, it may be possible to relieve the blockage by delivering a very high dose of radiation to the tumour by inserting a radioactive pellet inside your airway. The decision on which type of treatment to offer is very technical and will be explained to you by your Doctor. Below is a brief description of each type of treatment.

Laser Treatment

This treatment is given under a general anaesthetic. You will normally be admitted one or two days before the operation and should be able to go home one or two days after the operation. You will have a slightly sore throat as a result of the instruments which are passed into your air passages. You should not have any pain in your chest as a result of your treatment. You may have a slight cough afterwards and may cough up small amounts of blood and soot. However, this will rapidly improve and your breathing should be very much better. You will be kept under careful review in the clinic afterwards at this Hospital. It is possible that we will need to repeat your treatment at intervals, the overall idea is to avoid symptoms of breathlessness.

Airway Stenting

We insert stents under general anaesthetic and we will admit you to Hospital for one or two days before the operation and allow you home one or two days later. Again, you may have a sore throat after the procedure but will not experience any pain within your chest. As with laser treatment, the improvement in your breathing should be fairly immediate. We will keep you under careful observation after the stent has been inserted as an outpatient.

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Endobronchial Radiotherapy (or Brachytherapy)

This treatment is usually given with sedation and does not necessarily require a general anaesthetic. You will have a standard bronchoscopy and a tiny flexible plastic tube will be passed through the bronchoscope and left inside your air passage for 15-20 minutes. A radioactive pellet is passed inside the plastic tube and left inside your airway for only 10 minutes. During this time, it is important that you lie quietly and do not remove the plastic tube. It does not matter if you cough or sneeze, as this will not dislodge the catheter. You will be observed by a team of Nurses and Doctors throughout who can help you if you feel uncomfortable. You should be able to go home on the following day after treatment. The radioactive pellet is removed at the end of your treatment, which means that you will not give off any radiation afterwards, and so you can mix freely with members of the public.

The improvement in your breathing with this treatment will not be immediate but you should notice some improvement after two weeks with further improvements occurring over the next six weeks. Again, we would like to keep you under careful review in our Out Patient Clinic.

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Dr Jeremy George 12.05