

## SIX14: THORACOSCOPY IN CHILDREN IN THE DEPARTMENT OF PEDIATRIC SURGERY, TRAUMATOLOGY AND UROLOGY IN POZNAN

Przemysław Mańkowski<sup>1</sup>, Sebastian Moryciński<sup>1</sup>, Patrycja Sosnowska\*<sup>1</sup>, Olgierd Pietkiewicz<sup>1</sup>, Przemysław Lebioda<sup>1</sup>, Marcin Kapek<sup>1</sup> and Karolina Pańczak<sup>1</sup>

E-mail: Patrycja Sosnowska — patrycja.sosnowska@outlook.com

<sup>1</sup>Department of Pediatric Surgery, Traumatology and Urology, University of Medical Sciences Poznan, Poland

**Background** Thoracoscopy is one of the surgical techniques used for both diagnostic and therapeutic purposes. The aim of the study is to analyze purposes, complications and outcomes of thoracoscopic procedures in pediatric patients.

**Materials and methods** The retrospective analysis was based on clinical documentation of 88 patients treated in the Department of Pediatric Surgery, Traumatology and Urology in Poznan, who underwent thoracoscopic surgery in years 2000–2016. The following parameters were analyzed: the aim of the thoracoscopy, age of patient during surgery, time of hospitalization, time of treatment, frequency and time of maintenance of pre- and postoperative drainage, preoperative and postoperative diagnostics, postoperative complications, antibiotic therapy and laboratory and bacteriological test results.

**Results** The average age of patients who underwent thoracoscopy was 10 years. Girls accounted 52.6%, and boys 47.4% of patients. The most common indications for surgery were mediastinal tumor removal (15 patients), mediastinal tumor biopsy (15 cases), metastasis in lungs removal (10) and lymph nodes biopsy (9 patients). The average hospitalization time was 7 days, the longest in the group of patients treated for emphysema and mediastinal tumors. The most commonly performed diagnostic imaging was chest radiograph in both pre and postoperative period. Computed tomography was the second choice diagnostic exam. It was preoperatively performed in 38.9% of children. Mean time of surgery was 82 minutes; the longest in case of mediastinal cyst surgery (215 min) and the shortest due to pleural (25 min). Complications occurred in 4 patients, representing 5% of the study group. Observed complications were pneumothorax, which occurred in 3 patients and death of one during the procedure. Drains were inserted into the pleural cavity during 75.3 of surgeries. 85.5% patients had 1 drain and the rest 2 drains. The average drainage time was 7 days. 57.8% of patients had postoperative antibiotic therapy.

**Conclusions** The analysis demonstrated the common use of thoracoscopy, mainly in treatment of oncological diseases. It is an effective and safe method used both in diagnosis and therapy. Radiograph is the main diagnostic imaging used. The decision to use a catheter drain is related to the patient's clinical condition and depends on many factors.

**Key words** child, oncology, pediatric surgery, thoracoscopy