Value Of The Thoracic Ultrasound In The Assessment Of Malignant Pleural Effusion.

Thesis

submitted for partial fulfillment of the master degree in Chest Diseases

by

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List of Contents

List of Tables

List of Figures

List of Abbreviations

2D	Two Dimentional
ADA	Adenosine Deaminase
B-mode	Brightness mode
cc	Cubic centimeter
CECT	Contrast Enhanced Computed Tomography
cm	Centimeter
COPD	Chronic Obstructive Pulmonary Disease
CT	Computed Tomography
CXR	Chest X-ray

ESR	Erythrocyte Sedimentation Rate
EUS-FNA	Endoscopic Ultrasound with Fine Needle Aspiration
FNA	Fine Needle Aspiration
ICU	Intensive Care Unit
IMT	Inflammatory Myofibroblastic Tumor
kHz	Kilohertz
LDH	Lactate Dehydrogenase
MDCT	Multi-Detector Computed Tomography
m/s	Meter per Second
MHz	Megahertz
ml	Milliliter
mm	Millimeter
M-mode,	Motion mode
MRI	Magnetic Resonance Imaging
MT	Medical thoracoscopy
n	Number
No	Number
NPV	Negative Predictive Value
PPV	Positive Predictive Value

SD	Standard Deviation
sec	Second
SPSS	Statistical Package for the Social Sciences
TUS	Thoracic Ultrasound
UK	United Kingdom
US	Ultrasound
VTSA	Video Assisted Thoracoscopic Surgery
Vs	Versus

Introduction

A pleural effusion is an abnormal collection of fluid in the pleural space resulting from excess fluid production or decreased absorption ***(Diaz-Guzman and Dweik, 2007).***

Pleural effusion is a highly common clinical presentation in malignant and benign diseases. The differential diagnosis is broad and includes heart failure, parapneumonic effusion, empyema, pulmonary emboli, inflammatory disease and malignancies ***(Daniels and Ryu, 2011).***

The tests most commonly used to diagnose and evaluate pleural effusion include: Chest x-ray , Computed tomography (CT) scan of the chest, Ultrasound of the chest (US) ,Thoracentesis and pleural fluid analysis.When the pleural effusion has remained undiagnosed despite previous less-invasive tests, thoracoscopy may be performed ***(National Cancer Institute, 2006).***

Transthoracic ultrasound has received increased interest from chest physicians in recent years as it has the advantages of bedside availability, absence of radiation, and guided aspiration of fluid-filled areas and solid tumors ***(Beckh et al., 2002).***