

## ULTRASOUND METHOD

## Hospital gets new technology to do cancer biopsies

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UP UNTIL now Groote Schuur patients with lung cancer, lymphoma or tuberculosis have had to have open surgeries to examine the enlarged glands inside the chest for a proper diagnosis.

But thanks to new technology, doctors can now do biopsies on these glands without physically cutting through the skin.

Groote Schuur is one of the only two hospitals in the country with the R2 million Endobronchial ultrasound (Ebus) technology after it was donated by UCT. The other hospital is Nkosi Albert Luthuli in Durban.

Professor Keertan Dheda, head of pulmonology at Groote Schuur and UCT, said the new technique not only allowed a quicker diagnosis without the pain and discomfort of surgery, but



NON-SURGICAL

Professor Keertan Dheda, head of pulmonology at Groote Schuur and UCT, shows off the new device

PICTURE: TRACEY ADAMS

would also allow the hospital's respiratory clinic to do more of these diagnostic tests, resulting in early initiation

of treatment.

The new technique allowed for these glands to be sampled from with-

in the windpipe using real-time ultrasound guidance.

Unlike the mediastinoscopy (open surgical procedures), which was done through an incision on the neck, Dheda explained that the new technology used a thin flexible telescope (bronchoscope), which was passed through the mouth into the windpipe and other major airways. This allowed images of the surrounding tissues and affected area to be obtained from an ultrasound probe attached to the end of the bronchoscope.

The doctor performing the procedure then uses these images as a guide when taking samples of cells of the diseased lymph glands using a small needle attached at the end of the probing scope.

While Ebus technology is widely used in the US and Europe as a standard of care, in South Africa this is relatively new.

Groote Schuur started using it in January, and it was expected to reduce surgical mediastinoscopy procedures by 90 percent.

Dheda said the new technology would save the hospital time and money. Unlike surgery, which was done under anaesthesia and took about an hour to perform, and resulted in hospitalisation of patients, Ebus only took 45 minutes to perform.

"The procedure can be used for outpatients. Unlike a surgical procedure, which requires hospitalisation of patients to recover, with Ebus, patients are able to go home on the same day. There are no complications associated with wound healing, and therefore patients don't experience any discomfort," he said.

Between 100 and 120 Ebus procedures were expected to be performed at the hospital every year.

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