





UNIPORTAL THORACOSCOPIC RESECTION FOR THE SPINDLE CELL TUMOR OF ESOPHAGUS

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Uniportal thoracoscopic resection for the spindle cell tumor of esophagus Haining Zhou; Shoujun Tang; Chuan Zhong Suining Central Hospital, Chuanshan District, Suining, Sichuan Province, 629000 Objectives: Uniportal thoracoscopic for the huge spindle cell tumor of esophagusis is one of the most challenging surgeries. Here we reported a rare case of huge spindle cell tumor of esophagusis to explore the application of uniportal thoracoscopic in esophageal resection. Methods: A 61-year-old female was admitted due to swallow obstruction with breath tight for 1 month. The enhanced CT showed an irregular mass in the right posterior superior mediastinum with tracheal and esophageal displacement. The preoperative gastroscopy showed a superficial ulcer in the esophagus located 18-24 cm from the incisor and the biopsy results showed chronic mucositis. Bronchoscopy suggested extensive external compression stenosis of the airway. The differential diagnosis includes lymphoma, lung cancer, bronchial cysts, esophageal tumors, etc. Ultimately we decided to use uniportal thoracoscopic surgery for a biopsy or a complete resection of the tumor based on the intraoperative conditions. Results: During the operation, we found that the tumor was located in the right posterior superior mediastinum and originated from the intrinsic muscular layer of the esophagus. The spindle cell tumor of esophagus resection by uniportal thoracoscopic approach was carried out successfully. Pathological examination revealed esophageal leiomyoma. Conclusion: Adequate preoperative preparation is conducive to the selection of surgical options. The uniportal thoracoscopic resection for the spindle cell tumor of esophagus is feasible and comprehensive.