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Title: Endoscopic management of benign tracheobronchial tumors: Ten-year experience from a large, single center case series

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Body: Introduction: benign tracheo-bronchial tumors(TBT)usually induce airway obstruction and occasionally suffocation. Surgery is the recommended therapy, but it may be challenging and burdened with high frequency of complications. Rigid bronchoscopic management of benign TBT is a potential alternative. However, few data are available on the epidemiology of these lesions and on the safety of endoscopic treatment. We report on a series of 58 benign TBT diagnosed out of 15,120 total tracheo-bronchial endoscopic procedures performed from 2000 to 2012. Results: Thirty-four(61%) TBT occurred in males and mean age at diagnosis was 59.4 years(SD 7.2). Most(65%) grew distally to a main stem bronchus, 13(23.3%) were located into a main bronchus and 7(11%)were tracheal. Adenomas (2/58), amarthomas (21/58) and schwannomas(2/58)often located distal to the main bronchus (2/2,17/21 and 1/2,respectively),whereas leiomiomas(4/58) preferentially located in the trachea or in a main bronchus(3/4). All tumors were diagnosed in patients older than 60 years except for leiomiomas, schwannomas, and papillomas that also occurred in younger patients. Amartomas, leiomiomas, and polyps were frequent amongst males, the two cases of schwannomas occurred in females. Tumor eradication was obtained after a single procedure in 61% of cases,in 8.5% of cases a second or a third intervention was needed. Seven patients had to be addressed to open surgery for definitive eradication. No severe complications nor deaths were observed. Conclusions: data obtained from a large case series confirm that interventional rigid bronchoscopy for benign TBT is simple and safe, and this option should be considered beside open thoracic surgery.