

The use of Endoscopy in Oncology

Endoscopic examinations are extremely important for the **diagnosis of tumors** growing in hollow organs and body cavities. In addition to the diagnostic effect, endoscopic examinations can also have a **therapeutic** or **palliative** effect . We mainly use flexible endoscopes , less often rigid endoscopes (rectum, abdominal cavity).

Types of examinations

GIT

The gastrointestinal tract can be inspected in its entirety.

- esophagoscopy, gastroscopy , colonoscopy
- rectal endosonography
- ERCP
- laparoscopy (the surface of the liver, gallbladder, peritoneum, ovaries, uterus can be inspected)

Bronchopulmonary area

Bronchoscopy and / or BAL (bronchoalveolar lavage) is mainly used to diagnose opportunistic infections, but tumor cells can also be identified.

- mediastinoscopy (we will examine the upper mediastinum only after tracheal bifurcation; it is indicated to assess the operability of lung cancer and to biopsy the paratracheal nodes)
- thoracoscopy (examination of the pleural cavity)

Urinary tract

- cystoscopy or fluorescent cystoscopy (photosensitization by protoporphyrin - the cells then glow, the tumor cells glow up to 17 times more than healthy cells; it also differentiates mucosal dysplasia)

Gynecological area

- colposcopy (reveals changes in the cervix; vinegar test, cytology)
- hysteroscopy

References

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- Colonoscopy
- Bronchoscopy