



Title	Endobronchial Ultrasound
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Reference	Health Technology Assessment Report, MOH/P/PAK/I6I.08 (TR), 2008. www.moh.gov.my/MohPortal/htaDetail.jsp?action=view&id=52

Aim

To determine the effectiveness, safety, and cost effectiveness of using endobronchial ultrasound (EBUS) in managing lung tumor and other lung diseases.

Conclusions and results

There is good evidence to show:

- EBUS is safe and effective for diagnosing and staging lung tumor.
- Diagnosis obtained by EBUS-TBNA (transbronchial needle aspiration) and EBUS-guided TBB (transbronchial biopsy) averted the need for more surgery.
- The combine approach of EBUS-TBNA and EUS-FNA (endoscopic ultrasound-guided fine-needle aspiration) may replace more invasive methods in evaluating lung cancer patients.
- EBUS improves the safety of therapeutic procedures and can assist in decision making.

There is no retrievable evidence on the cost effectiveness of EBUS.

Recommendations

It is recommended that EBUS be used for diagnosing and staging lung cancer. It can also be used for interventional bronchoscopy. EBUS should be made available in Regional Respiratory Centres in Malaysia. However, centers utilizing this technology should have trained personnel to ensure that the available technology will be cost effective and not underutilized.

Methods

Databases such as PubMed, Ovid, ProQuest, Cochrane databases, Food and Drug Administration (FDA), and HTA databases from 1999 to 2007 were searched. There was no limitation to language. All relevant literature was systematically reviewed, and evidence was graded according to the Oxford Centre for Evidence-based Medicine Levels of Evidence (May 2001).