

16F vs 24F Chest Drain After Minimally Invasive Lobectomy and/or Segmentectomy

NCT06958848

Status	RECRUITING
Phase	Not Applicable
Sponsor	University Hospital, Basel, Switzerland
Enrollment	124 participants

Key Eligibility Criteria

Inclusion (5)

- Informed Consent signed by the patient (all sex and gender)
- Patients' age from 18 to 80 at time of study inclusion
- American Society of Anaesthesiologists (ASA) physical status classification I to III
- Patients with resectable non-small cell lung cancer (NSCLC) deemed operable by minimally invasive surgical technique (UICC Stages 0-II according to Tumor Nodes Metastasis (TNM) Classification 8th edition and selected patients with UICC Stage IIIA) or pulmonary metastasis or pulmonary lesion resected by lobectomy and/or segmentectomy
- Minimally invasive anatomical lung resections under general anaesthesia: lobectomy, lobectomy with wedge resection, lobectomy combined with segmentectomy, segmentectomy with wedge resection, bilobectomy

Exclusion (15)

- Previous thoracic surgery on the same side within 6 months
- Lung cancer complicated with pleural empyema
- Patients with chronic pain who receive opiates/gabapentin/pregabalin
- Patients who consume opiates/benzodiazepines
- Congestive heart failure NYHA Class III or IV
- ... and 10 more (see full listing online)

Locations (1 total)

University Hospital Basel, Basel, Switzerland