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原著

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Orginial Articles

Case Reports

Predicting Severe Obstructive Sleep Apnea Syndrome in Adult Taiwanese Males with Excessive Daytime Sleepiness: A Prospective Observational Study

Chih-Hao Shen, Fan-Chun Meng, Chung-Kan Peng, Chien-Wen Chen, Chih-Feng Chian, Wann-Cherng Perng, Shih-Wei Wu

Purpose: Patients with severe obstructive sleep apnea syndrome (OSAS) are associated with greater risks of mortality and morbidity. Excessive daytime sleepiness (EDS) is the major complaint of patients with OSAS. The objective of this study was to identify the predictors for severe OSAS in adult Taiwanese males presenting with EDS.

Materials and Methods: This was a prospective observational study of 135 consecutive adult males visiting our center. Patients with an Epworth Sleepiness Scale (ESS) score > 10 were enrolled and divided into 2 groups: a severe OSAS group, consisting of patients with an apnea-hypopnea index (AHI) ≥ 30, and a non-severe OSAS group, consisting of patients with an AHI < 30. Demographic and clinical data of the 2 groups were extracted for analysis.

Results: A total of 88 patients were enrolled in the study. There were 45 patients (51.1%) in the severe OSAS group. Increased body weight, body mass index (BMI), neck, waist, and hip circumferences, waist/hip ratio, and co-existing gastroesophageal reflux disease were statistically significant factors in the severe OSAS group (p<0.05). Increased total lung capacity % was statistically significant in the non-severe OSAS group (p<0.05). In the multivariate analysis, BMI was an independent factor for severe OSAS (odds ratio, 1.302; 95% confidence interval, 1.017-1.667; p=0.037). Using area under the receiver operating characteristic (ROC) curve, BMI had an acceptable discriminatory power in predicting severe OSAS (area under the ROC curve: 0.774, sensitivity: 0.733; 1-specificity: 0.814). The cut-off point for BMI in detecting severe OSAS was 27.575 kg/m^2.

Conclusions: BMI was a predictor for severe OSAS in adult Taiwanese males with EDS. Local clinicians should be able to use this predictor to decide whether referral for polysomnography is mandatory. ***(Thorac Med 2016; 31: 67-76)***

Key words: obstructive sleep apnea syndrome, excessive daytime sleepiness, body mass index

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過度嗜睡之台灣成年男性患有重度阻塞性睡眠呼吸中止症候群之預測因子：一個前瞻性觀察研究

沈志浩　孟繁俊　彭忠衍　陳健文　簡志峯　彭萬誠　吳世偉

研究目的：過度嗜睡為阻塞性睡眠呼吸中止症候群重要症狀。本研究目的為找尋過度嗜睡之成年台灣男性患有重度阻塞性睡眠呼吸中止症候群（severe OSAS）之預測因子。

研究方法：本研究為前瞻性觀察研究，共連續評估 135 位本院就診之成年台灣男性，招收其中 Epworth Sleepiness Scale 大於 10 分者，分為 severe OSAS（AHI ≥ 30）及 non- severe OSAS（AHI < 30）兩組，並收集病患之臨床參數加以分析。

研究結果：共 88 病患加入研究，severe OSAS 組有 45 人。體重，身體質量指數（BMI），頸圍，腰圍，臀圍，腰臀比，胃食道逆流，肺總容積百分比在兩組間有明顯統計差異。以多變項邏輯式分析，BMI 對 severe OSAS 為獨立預測因子。

結論：BMI 可作為出現過度嗜睡之成年台灣男性是否患有 severe OSAS 之預測因子。*(胸腔醫學 **2016; 31: 67-76**)*

關鍵詞：過度嗜睡，阻塞性睡眠呼吸中止症候群，身體質量指數

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Detected EGFR Mutation Could Predict Better Outcome of Lung Adenosquamous Carcinoma Patients

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Introduction: Epidermal growth factor receptor (EGFR)-mutant adenocarcinomas (ADC) have a better prognosis than EGFR-wild type cancers, but the role of EGFR in adenosquamous carcinoma (ADSC) is still under investigation. Our aim in this study was to evaluate the role of EGFR mutation in the prognostic outcome of advanced ADSC.

Methods: We retrospectively reviewed the medical records of 74 patients diagnosed with ADSC from January 2004 to December 2013, and collected data on 260 patients diagnosed with stage IIIB/IV ADC and squamous cell carcinoma (SCC) from July 2011 to June 2012 to further compare progression-free survival (PFS) and overall survival (OS).

Results: Seventeen (17/74, 23.0%) ADSC patients underwent EGFR mutation analysis; 8 (47.1%) were wild-type, and 9 (52.9%) were EGFR-mutant. More never-smokers were found in the EGFR-mutant group (9/9, 100%, p=0.029). ADC patients had significantly better PFS with first-line treatment, followed by ADSC and SCC patients (median PFS: 4.39, 3.50, 2.86 months, respectively; log-rank=0.002). There was no significant difference in OS between the ADC, SCC, and ADSC groups. The ADSC EGFR-mutant group had significantly better PFS than the wild-type group (3.75 vs. 0.71 months; log-rank=0.010), but there was no statistical difference in OS between the 2 groups.

Conclusion: We found that the prognosis of the ADSC patients was midway between that of the SCC and ADC patients. Furthermore, EGFR-mutant ADSC patients tended to have a better prognosis than those with wild-type ADSC. Our results suggest that to improve ADSC patient survival, we should check for EGFR mutation, especially in never-smokers. ***(Thorac Med 2016; 31: 77-87)***

Key words: EGFR (epidermal growth factor receptor) mutation, lung adenosquamous carcinoma, outcome

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偵測上皮細胞生長因素接收器突變可能可用以預測肺部腺鱗癌病患有較佳的預後

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林炯佑 * 林孟志 *,**

前言：上皮細胞生長因素接收器突變的肺腺癌有較佳的預後，但是其在肺部腺鱗癌的角色仍然在研究中，我們的目標是評估此突變對於晚期的肺部腺鱗癌預後的影響。

方法：回溯性收集 2004 年至 2013 年於高雄長庚醫院診斷肺部腺鱗癌的 74 位病人的資料，並且收集 2011 年 7 月至 2012 年六月診斷為 IIIB 或第四期的肺腺癌及鱗狀細胞癌病人共 260 位的資料以比較無惡化存活期及整體存活期。

結果：17 位肺部腺鱗癌病人接受分析，其中 8 位無突變，9 位有突變。有突變這組有較多的未抽菸者（9/9, 100%, p=0.029）。肺腺癌於第一線的治療有較佳的無惡化存活期，其次為腺鱗癌及鱗狀細胞癌。有突變的腺鱗癌相較於沒有突變的腺鱗癌有較佳的無惡化存活期。

結論：我們發現腺鱗癌的預後介於肺腺癌及鱗狀細胞癌之間。而且，上皮細胞生長因素接收器突變的腺鱗癌相較於沒有突變的腺鱗癌似乎有較佳的預後。因此為了增進病人的存活率，對於腺鱗癌的病人應該要檢測此突變，特別是未曾抽菸者。*(胸腔醫學* ***2016; 31: 77-87)***

關鍵詞：上皮細胞生長因素接收器突變，肺部腺鱗癌，預後

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Primary Tracheal Hamartoma

Dong-Lin Tsai*, Chih-Jen Yang**,****, Jui-Ying Lee*, Chun-Chieh Wu***,
Yen-Lung Lee*, Shah-Hwa Chou*,****

The authors report an adult with a tracheal hamartoma who presented with obstructive airway symptoms. Elective tracheal sleeve resection was successfully performed to remove the tumor.

On reviewing the literature from 1953 to 2013, we found that approximately 20 cases of tracheal hamartoma have been reported. Our present case and the review of the literature illustrate that segmental resection with end-to-end anastomosis remains the standard procedure in managing malignant tracheal tumors and benign lesions attached to the lumen with a broad base or invading the tracheal wall. However, physicians have been accumulating more and more experience with methods of bronchoscopic resection such as endobronchial electrocautery, laser and cryotherapy. These methods may become treatment choices for benign tumors with a narrow base or for malignant tumors in elderly patients. ***(Thorac Med 2016; 31: 88-94)***

Key words: trachea, hamartoma

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氣管過誤瘤

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根據文獻報告，無論是良性或是惡性腫瘤，會長在氣管的已經是少數，而在這些少數的氣管腫瘤中，大於三分之二是惡性的。而其餘的良性腫瘤之中，最常見的是鱗狀上皮細胞乳頭狀瘤、纖維瘤、以及血管瘤。因此，氣管過誤瘤可以算是相當罕見。

我們在此分享一個成功以手術完整移除氣管過誤瘤的經驗。這個六十四歲有高血壓與糖尿病的男性，因為乾咳兩週至診所求治，經過轉院及一連串的檢查後發現氣管腫瘤的存在，有鑒於經支氣管鏡切片可能因出血或腫瘤發炎、水腫阻塞氣管而導致生命危險，我們決定直接用手術為病人切除病灶。

回顧過去的文獻，大約只有二十個這樣的病人被報告出來，我們為大家整理在表格之中。這些病人接受了各式各樣的治療方式，其中以手術完整切除還是被認為是標準作法。近年來，由於支氣管鏡介入治療的蓬勃發展，對於不適合接受手術的病人，也有用支氣管鏡介入治療，例如：雷射、冰凍等的經驗報告。*(胸腔醫學* ***2016; 31: 88-94)***

關鍵詞：氣管，過誤瘤

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Intralobar Pulmonary Sequestration Presenting as a Bullous Abscess in a Middle-Aged Man: A Case Report and Review of the Literature

Ying-Yi Chen, Tsai-Wang Huang, Hsian-Her Hsu*, Hung Chang, Shih-Chun Lee

Intralobar pulmonary sequestration is a rare congenital malformation and is often found incidentally during operation. We report a rare case of infected intralobar pulmonary sequestration clinically presenting as a bullous abscess of the lung in a 52-year-old patient. In a review of the literature on surgical cases of intralobar pulmonary sequestration in patients older than 50, we found that ours was the 15th case and the only case with an aberrant artery from the celiac trunk. We discuss this rare presentation as a bullous abscess in a sequestrated lung, as well as the thinking process involved in the preoperative diagnosis and the pitfalls in surgical management. Preoperative diagnosis of sequestrated lung could reduce the unsuspected risk of vessel injury. Therefore, taking advantage of imaging studies and medical records may enable us to optimize treatment selection and safety in patients with sequestrated lung combined with bullous abscess. ***(Thorac Med 2016; 31: 95-101)***

Key words: bullous abscess, pulmonary sequestration

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一位中年男子之肺葉內游離肺以肺疱膿瘍來表現：病例報告與文獻回顧

陳穎毅　黃才旺　徐先和 *　張宏　李世俊

一位 52 歲男性具有游離肺卻不知道，而且每年都有規律接受健康身體檢查，直到最近一個月因發燒住院照胸部 X 光片才發現在心臟後面有一個圓形陰影，在不知道腫瘤特性下，轉到本院做進一步檢查。經過一連續檢查後，發現是肺疱膿瘍機會比較大，甚至在影像結果中證實同時具有游離肺。最後病人接受胸腔鏡輔助左下肺葉切除術，術中沒有傷到來自腹主動脈分支（celiac trunk）畸變的動脈造成大出血，也沒有讓膿瘍破掉造成膿胸或感染，恢復良好。雖然游離肺很難在術前發現，所以提出這個病例來讓臨床醫師在術前可以多注意下肺葉有病兆的病人，在判讀電腦斷層時，把游離肺納入可能的臆斷之一，避免後續治療或是手術造成不必要的併發症。*(胸腔醫學 **2016; 31: 95-101**)*

關鍵詞：游離肺，肺疱膿瘍

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Surgical Repair of Missed Boerhaave Esophagus

Wei-Yi Lee, Jen-Chih Chen, Jane-Yi Hsu, Chin-Chieh Hsu

Boerhaave's syndrome is a spontaneous transmural rupture of the left posterolateral wall of the distal third of the esophagus. The symptoms are not always evident, which results in a diagnostic challenge. Primary repair may be performed in patients who present within 24 h of perforation. However, most cases are diagnosed late. There are no definitive strategies to repair late perforations. We report the successful repair of a ruptured esophagus after a 50-day delay in diagnosis, and review the literature. ***(Thorac Med 2016; 31: 102-107)***

Key words: Boerhaave's syndrome, spontaneous hydropneumothorax

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成功修補延誤診斷自發性食道破裂

李威億　陳仁智　許正義　許晉杰

Boerhaave's syndrom 為食道遠端左後外側自發性破裂，臨床表現通常非特異性症狀，因此造成診斷上的困難，治療方面，如果是在破裂 24 小時內診斷出來，直接手術縫合修補是可行的，然而大部分的病人被正確診斷都是比較晚了，這類的病人就沒有明確的治療方式。這次我們提出一個案例，雖然這位病人在有症狀後的第五十天才被診斷出來，我們仍然成功地手術修補了破裂的食道，並且回顧了相關的文獻。
(胸腔醫學 ***2016; 31: 102-107)***

關鍵詞：食道破裂，自發性氣水胸

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Primary Pulmonary Mesenchymal Chondrosarcoma: A Case Report with Clinical Course and Response to Radiation

Chi-Tai Lee, Chien-Chen Tsai*, Hou-Tai Chang, Yeong-Long Hsu

Primary chondrosarcoma of the lung is a rare malignancy. Primary mesenchymal chondrosarcoma, a subtype of chondrosarcoma characterized by differentiated cartilage admixed with solid highly cellular areas composed of undifferentiated small round cells, is an extremely rare primary malignancy of lung origin. To the best of our knowledge, only 4 cases of primary pulmonary mesenchymal chondrosarcoma have been reported in the English literature. However, in past published cases of this malignancy, with its high local relapse rate and distant metastasis, there was no report of postoperative positron emission tomography-computed tomography (PET-CT) scans that could prove the primary origin was the lung. In addition, the clinical course and response to radiation as rescue therapy were not discussed before. We followed up our patient for 37 months and report the case. ***(Thorac Med 2016; 31: 108-114)***

Key words: mesenchymal chondrosarcoma, pulmonary

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原發性肺臟間葉軟骨肉瘤：一例臨床病程及放射治療反應之案例報告

李吉泰　蔡建誠*　張厚台　許永隆

原發性肺臟軟骨肉瘤是一種罕見的惡性腫瘤。原發性間葉軟骨肉瘤是其中的一個亞型，它有由分化的軟骨混合著未分化的小圓細胞所組成的固體高度細胞性區域的特徵，肺臟原發性間葉軟骨肉瘤是一種極為罕見的惡性腫瘤。就我們所知，目前僅有 4 例的英文案例報告。然而，這種高度局部復發及遠處轉移的惡性腫瘤，在過去的案例報告中並沒有術後的正子電腦斷層掃描以證明肺臟為原發。除此之外，完整的臨床病程、以及如同此位病人因腫瘤復發合併呼吸道壓迫瀕臨呼吸衰竭，我們以放射治療作為營救治療與症狀緩解的工具，成功讓病人脫離氣管插管的風險，此臨床反應在過去也未被提及的。因此，我們追蹤了這位病患有 37 個月，並且記錄了這位原發性肺臟間葉軟骨肉瘤的臨床病程。*(胸腔醫學 **2016; 31: 108-114**)*

關鍵詞：間葉軟骨肉瘤，肺臟

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Peritoneal Metastasis - An Unusual Presentation of Lung Cancer Metastasis: A Case Report and Literature Review

Wei-Yuan Chang, Chien-Chung Lin, Wu-Chou Su*, Wan-Chen Liu**, Han-Yu Chang

Lung cancer is 1 of the leading causes of cancer death worldwide. Approximately 40-50% of patients with lung cancer manifest metastases at the time of diagnosis. The most common sites of extrapulmonary metastasis are bone, liver, brain, and adrenal glands. Metastasis in unusual locations, such as the small intestine and the colon, has also been reported; however, peritoneal metastasis is rare. We present a case of lung adenocarcinoma in a patient with the initial presentation of abdominal pain. Peritoneal metastasis was confirmed by abdominal computed tomography. ***(Thorac Med 2016; 31: 115-119)***

Key words: peritoneal metastasis, lung cancer

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腹膜轉移－一種罕見的肺癌轉移方式：病例報告及文獻回顧

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肺癌是目前全世界造成癌症死亡的首要原因之一。大約有 40-50% 的病人在初次診斷時併有轉移的情形。而常見的肺外轉移部位包含骨骼，肝臟，腦部及腎上腺。另外一些不常見的部位，例如小腸和大腸也曾經被報導過；然而腹膜轉移依然相當罕見。在此，我們將報告一位肺腺癌以腹痛併腹膜轉移為表現之罕見病例。*(胸腔醫學 **2016; 31: 115-119**)*

關鍵詞：腹膜轉移，肺癌

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Extranodal Natural Killer/T-Cell Lymphoma with Diffused Lung, Spleen, and Gastrointestinal Tract Involvement: A Case Report

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Extranodal natural killer/T-cell lymphoma (ENK/TCL) is associated with Epstein-Barr virus (EBV) infection. This disorder is rare in the United States and Europe, but relatively common in Asia, South and Central America, and Mexico. The nasal region is the most frequent site of involvement, but the tumor may also appear at other extranodal sites such as skin, testis, kidney, upper gastrointestinal tract, and the orbit. Thoracic lesions without nasal involvement that rapidly progress to acute respiratory failure as the initial clinical presentation are extremely rare. We present the case of a 35-year-old man who suffered from ENK/TCL with disseminated lung involvement that progressed to acute respiratory failure. Despite aggressive treatment, the patient died shortly after the initiation of therapy. An extensive review of the literature showed that ENK/TCL patients with pulmonary involvement usually present a highly aggressive clinical course and have a poor prognosis. ***(Thorac Med 2016; 31: 120-127)***

Key words: extranodal natural killer/T-cell lymphoma, Epstein-Barr virus, lymphoma with lung involvement

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淋巴腺外 NK (Natural killer)/T 細胞淋巴瘤廣泛性肺部、脾臟、腸胃道侵犯患者－病例報告

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淋巴腺外 NK (Natural killer)/T 細胞淋巴瘤和 EB (Epstein-Barr) 病毒感染有關，本病在美國罕見但常見於亞洲、中南美洲與墨西哥。鼻腔是本病最常侵犯的部位，但也可能侵犯其他淋巴結外部份，例如皮膚、睪丸、腎臟、上消化 / 呼吸道和眼眶部位等。至於該病先以肺部侵犯且快速進展至呼吸衰竭但無鼻部侵犯於臨床上相當罕見。我們報導一例 35 歲男性的淋巴腺外 NK/T 細胞淋巴瘤以廣泛性肺部侵犯併發呼吸衰竭，即使經過治療，該患者還是很快因併發症死亡。經回顧先前的文獻發現，淋巴腺外 NK/T 細胞淋巴瘤以肺部侵犯為主要標徵者，其病程常迅速惡化與預後很差。*(胸腔醫學 **2016; 31: 120-127**)*

關鍵詞：淋巴腺外 NK (Natural killer)/T 細胞淋巴瘤，EB (Epstein-Barr) 病毒，肺部淋巴瘤

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Rare Case Report of Intrathoracic Chondrosarcoma Presenting as a Posterior Mediastinal Tumor-Like Shadow

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We reported a rare case of intrathoracic chondrosarcoma at the posterior chest wall presenting as a posterior mediastinal tumor in a 19-year-old female. A mass in the region of the posterior mediastinum was incidentally found on chest film performed for a routine health check-up. Advanced image studies including chest computed tomography and magnetic resonance imaging revealed a posterior mediastinal tumor suspected of being a neurogenic tumor. The patient underwent resection of the tumor and the pathological examination revealed grade 1 chondrosarcoma. We discuss this rare case that differed from a posterior mediastinal tumor and chondrosarcoma of the posterior chest wall based on the clinical presentation and imaging study. ***(Thorac Med 2016; 31: 128-134)***

Key words: chondrosarcoma, chondroma, posterior mediastinal tumor, young woman

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一個以後縱膈腔腫瘤形式呈現胸腔內軟骨肉瘤的罕見病例

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我們報告一個 19 歲女性以後縱膈腔腫瘤呈現的後胸壁胸腔內軟骨肉瘤罕見的病例。例行健康檢查在胸部 X 光意外發現一個腫瘤在後縱膈腔。進一步的影像學，包括胸部電腦斷層掃描和磁振造影發現了後縱膈腔腫瘤疑似為神經源性腫瘤。因此，她接受了手術切除，病理顯示為第 1 級軟骨肉瘤。我們討論罕見的病例來分辨後縱膈腔腫瘤及後胸壁軟骨肉瘤的不同，以提供臨床醫師處理相關案例之經驗。*(胸腔醫學* ***2016; 31: 128-134)***

關鍵詞：軟骨肉瘤，軟骨瘤，後縱膈腔腫瘤，年輕女性

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