Department of Diagnostic & Interventional Radiology

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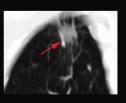
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Low Dose CT Thorax

診斷及介入放射部

Department of Diagnostic & Interventional Radiology

Lung cancer is the number one killer for men and women. It is well known that with advanced disease (stage IV), the 5 years survival is only 18%. With early disease (stage I), the 5 years survival is 70%. Common sense, therefore tells us that early detection of tumour is vital. Please note there is no data at the present time to say that early detection decreases mortality rate.

Low Dose CT Scan of Thorax

This is a new tool to screen the high risk population, e.g. heavey smokers, for lung cancer. Early Lung Cancer Project (ELCAP) described in Lancet in July of 1999 serves as a valuable guideline. In this study which involved 1,000 patients, 2.7% lung cancers were picked up and 85% of these were stage I disease. On the same population, chest X-ray only picked out 0.7% of the cancers and only 17% was stage I disease. Therefore chest X-ray cannot be used to look for early lung cancer.

How is Low Dose CT Thorax Performed?

A person having this screening test will be required to lie on the CT table. After positioning, one is required to take a single breath-hold for 5-10 seconds and the examination will be completed.

No fasting or injection of contrast is required.

Who should have a Low Dose CT Thorax?

Smoking is one of the known causes of lung cancer. Every heavy smoker should consider having a Low Dose CT Thorax as a screening procedure. Patients with a strong family history may also consider having this test.

What is the Radiation Dose from a Low Dose CT Thorax?

The radiation dose approaches that of a PA and lateral chest X-ray.

What is the Accuracy Rate of Low Dose CT Thorax?

Detection of lesions measuring 5mm approaches 100%.

What should I do with the Results?

If the test is negative, no follow-up is necessary. Patient should follow the normal course of health check and have another Low Dose CT Thorax in the following year.

If a small nodule (less than 5mm) is detected, follow-up scans in the 3rd, 6th, 12th and 24th month after the first scan are suggested to ensure that there is no change.

If the nodule is 5mm to 10mm in diameter, a follow-up study at 3 months or a biopsy is suggested.

For nodules greater than 10mm, a biopsy is recommended.

診斷及介入放射部

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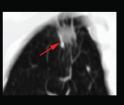
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查詢或預約,歡迎聯絡我們 a









低輻射量胸肺 電腦掃描

診斷及介入放射部

Department of Diagnostic & Interventional Radiology

肺癌是男性和女性的頭號殺手。若果診斷到的肺癌已是第四期,五年存活率只有18%,早期的肺癌若能及早發現並加以治療,五年存活率可達70%。由此可見及早診斷腫瘤的重要性。不過,及早發現肺癌,病者的死亡率是否會有確實數字上的改進仍有待進一步研究。

低輻射量胸肺電腦掃描

這是一種幫助肺癌高危一族普查的工具,例如大量吸煙的人便屬於肺癌高危者。權威醫學雜誌Lancet於1999年7月刊登的一篇有關《Early Lung Cancer Project (ELCAP)》研究的文章便有助了解情況。這項研究包括一千名病人,低輻射量胸肺電腦掃描發現2.7%的病人患有肺癌,而其中85%的肺癌屬於第一期。相反,在同一批病人中,胸部X光片只找出0.7%的病人有肺癌,而其中只有17%是第一期。所以用X光診斷早期肺癌不大可靠。

低輻射量胸肺電腦掃描如何進行?

進行此項檢查時,閣下先要平臥在電腦掃描機的床上,屏息呼吸大約5至10秒,檢查便可完成。

檢查前不用禁食,而且亦不需要注射造影劑。

誰人需要低輻射量胸肺電腦掃描? 吸煙是肺癌的主要成因。大量吸煙人士應考慮接受低輻射量胸肺電腦掃描普查。若果家族中有人曾患肺癌,亦可以考慮做這個檢查。

低輻射量胸肺電腦掃描有多少輻射量? 這檢查的輻射量大概等於一張正面加一張側面的肺部 X光片的輻射量。

低輻射量胸肺電腦掃描的準確性

對於量度有5mm大的肺部腫瘤的診斷率接近100%。

得知結果後我應怎樣做?

若果檢查結果是正常的,甚麼也不需做,閣下只需每年照常進行身體檢查,並接受低輻射量胸肺電腦掃描。若果檢查發現一顆細於5mm的腫瘤,閣下便應分別在三、六、十二及廿四個月後再接受低輻射量胸肺電腦掃描,以確定腫瘤有否增大。

若果腫瘤的大小在5至10mm之間,閣下可選擇三個 月後重複掃描,又或者可以接受活組織檢查。

若果腫瘤大於10mm,便應立刻接受活組織檢查。

低輻射量胸肺電腦掃描 診斷及介入放射部