

# ARCHIVOS DE Bronconeumología



#### www.archbronconeumol.org

# **Clinical Image**

# Fanning Technique for Endobronchial Ultrasound-Guided Transbronchial Mediastinal Cryobiopsy: It is Possible



Miguel Angel Ariza-Prota<sup>a,\*</sup>, Javier Pérez-Pallarés<sup>b</sup>Francisco López-González<sup>a</sup>

<sup>a</sup> Pulmonologist, Hospital Universitario Central de Asturias (HUCA), Pulmonology Department, Oviedo, Spain <sup>b</sup> Pulmonologist, Hospital Universitario Santa Lucía, Pulmonology Department, Cartagena, Murcia, Spain



Fig. 1. EBUS image showing the 1.1 mm cryo-probe inside the station 7 lymph node. By performing the fanning technique, we were able to accurately place the cryo-probe in multiple zones of the lymph node.

EBUS-TBNA sampling techniques vary greatly among interventional pulmonologists. One of those variations is the fanning technique, which consists of sampling multiple areas within a lymph node in each pass by using the "*up-down*" lever of the EBUS scope. Fanning technique is especially used in endoscopic ultrasound-fine needle aspiration for pancreatic lesions<sup>1</sup>. It could be argued that one of the drawbacks of performing an EBUS-guided mediastinal cryobiopsy (Cryo-EBUS) is that it is limited to taking a sample from a single area of the lesion since the 1.1 mm cryo-probe (*Erbecryo 20402-401, Tubingen, Germany*) is inserted through a single pathway created by the FNA puncture. We show the case of a 52-year-old man with an enlarged subcarinal lymph node (station 7) localized by EBUS and a fine needle aspiration (FNA) was performed using a 22-G needle (*SonoTip TopGain; Medi-Globe, Rohrdorf, Germany*). After the FNA was performed, the 1.1 mm cryoprobe was introduced gently under ultrasound guidance through the single pathway created by the FNA puncture; once inside the lymph node we performed the fanning technique, positioning the cryo-probe in the desired area by moving the lever of the EBUS scope up or down (Fig. 1). Three cryobiopsies were taken in three different areas of the lymph node by freezing for 5 s with no complications. The diagnosis was compatible with small cell lung carcinoma.

## **Conflict of interests**

The authors state that they have no conflict of interests.

### Appendix A. Supplementary material

Supplementary material associated with this article can be found in the online version available at doi:10.1016/j.arbres.2023.08.004

### Reference

 Lee JM, Lee HS, Hyun JJ, Lee JM, Yoo IK, Kim SH, et al. Slow-pull using a fanning technique is more useful than the standard suction technique in EUS-guided fine needle aspiration in pancreatic masses. Gut Liver. 2018;12:360–6, http://dx.doi.org/10.5009/gnl17140. PMID: 29409303; PMCID: PMC5945268.

\* Corresponding author. E-mail address: arizamiguel@hotmail.com (M.A. Ariza-Prota).

https://doi.org/10.1016/j.arbres.2023.08.004

0300-2896/© 2023 SEPAR. Published by Elsevier España, S.L.U. All rights reserved.