

Thoracic Surgery

Treating a wide range of chest disorders



Thoracic Surgery at UCLA

The UCLA Division of Cardiothoracic Surgery is among the nation's leaders in providing care for a wide range of chest disorders. With experience that is difficult to match, and offering a full spectrum of treatment options, UCLA thoracic surgeons achieve top outcomes in cases ranging from the relatively routine to the unusually complex.

Few treatment centers anywhere can offer the across-the-board excellence available at UCLA. The program attracts a high volume of patients, enabling physicians and staff to accumulate a wealth of experience treating a full range of conditions. This experience is crucial to achieving the best possible outcomes.



Full Range of Treatments

UCLA's multidisciplinary team of experts maintains the highest standards of care for chest disorders. In addition to thoracic surgeons, the team includes specialists in anesthesiology, gastroenterology, medical oncology, radiation oncology, pathology, pulmonary medicine and radiology, among others.

With top-caliber expertise in prevention, detection and treatment, and one of the world's leading research programs, UCLA not only provides the most advanced therapies, but often defines the leading edge of care.



Thoracic Oncology

As part of UCLA's NCI-designated Comprehensive Cancer Center, the UCLA Thoracic Oncology Program treats patients with the full range of tumors, including a number of relatively uncommon conditions that would rarely be seen by most cardiothoracic surgeons, but are part of the core practice at UCLA.

UCLA thoracic surgeons perform complex airway resections and reconstructions to treat tracheal and bronchial airway tumors. For patients who are not candidates for surgery, they offer palliative procedures using lasers or stents to help alleviate shortness of breath and chest discomfort.

UCLA's surgical team has extensive experience performing extrapleural pneumonectomy and pleurectomy decortication for the surgical treatment of mesothelioma and, in consultation with patients and their referring physicians, can provide the most appropriate treatment for each individual patient.





As part of UCLA's Sarcoma Program, which ranks amongst the country's busiest, UCLA thoracic surgeons bring a high level of expertise to the care of patients with thoracic sarcoma. They are able to determine not only which treatments are most appropriate for each patient, but how best to sequence treatments for an optimal outcome in each case. Complex chest wall, mediastinal and lung tumors are treated regularly.

In addition to treating primary thoracic tumors, the program treats patients whose cancer has metastasized from other locations to the lungs, chest wall or mediastinum. Even patients with metastatic disease may be candidates for surgical resection in the appropriate circumstances. Although primary mediastinal tumors are uncommon, UCLA thoracic surgeons frequently care for patients who have thymomas, thymic carcinomas, germ cell tumors and sarcomas.

Adult Chest Wall Disorders

Concave and convex congenital projections of the chest wall — pectus excavatum and pectus carinatum — usually become more pronounced as patients age. While these conditions had previously been considered to be principally cosmetic, surgical correction often significantly improves symptoms. UCLA thoracic surgeons also treat sternal and chest wall tumors. Treatment can require resection of the breast plate or ribs and complex reconstructions with prosthesis and muscle flaps.

Myasthenia Gravis

For patients with this autoimmune neurological disorder that impairs motor function, thymectomy — removal of the thymus gland — can significantly improve or even resolve symptoms. UCLA thoracic surgeons are highly experienced in using less invasive thoracoscopic and robotically assisted techniques.

Esophageal Disease

The UCLA Center for Esophageal Disorders offers comprehensive care to patients with benign and malignant esophageal diseases. We use the latest minimally invasive techniques where possible to perform a full range of esophageal procedures and collaborate with UCLA gastroenterologists to offer such therapies as endoscopic mucosal resection, in which the esophageal lining is removed while the esophagus itself is preserved. UCLA thoracic surgeons also have vast experience in the treatment of benign esophageal disorders, such as achalasia, gastroesophageal reflux disease (GERD) and esophageal diverticula, as well as Barrett's esophagus and esophageal cancer.

End-stage Lung Disease

Emphysema traps air in areas of the lungs that have lost their elasticity, creating dead spaces that do not contribute to respiration. Select patients can benefit from lung volume reduction surgery (LVRS). Removing the diseased tissue can allow the normal lung areas more room to expand and improve overall lung function. LVRS can be used to palliate patients' shortness of breath or as a bridge to lung transplantation.

Minimally Invasive Surgery

UCLA surgeons have exceptional experience in performing video-assisted thoracic surgery (VATS), also called thoracoscopy, and laparoscopy. This allows patients quicker recovery with less pain, and is performed in cases ranging from simple biopsies to complex resections. Laparoscopic techniques are also being applied to surgeries for esophageal diseases. Robotic surgery is increasingly being used in appropriate cases for various chest diseases.

Hyperhidrosis

Patients experiencing this disorder of excessive perspiration in the axilla and hands may benefit from surgical treatment. UCLA thoracic surgeons use a minimally invasive VATS procedure called sympathectomy to sever the sympathetic nerves that control sweating to these areas.



Research

As one of only seven NCI-designated Specialized Programs of Research Excellence (SPORE) in lung cancer, UCLA is advancing the frontiers of lung cancer treatment in targeted therapy, immunotherapy and chemoprevention as well as in understanding carcinogenesis. Patients can often find new options at UCLA with leading-edge investigational therapies in clinical trials.