

# Endoscopic and Beam Parallel to the Early Diagnosis of Esophageal Cancer

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## Abstract

The comparative analysis of x-ray and endoscopic diagnosis of early stages of cancer of the esophagus. Stresses that the manifestation of this disease starts with the appearance of symptoms in patients, which they have not paid due attention is salivation and impotence. If at that time immediately conducted an x-ray study, by the nature of the deformation of the lumen of the esophagus, or installed a diagnosis or cause any speculation about the presence of cancer, and esophagoscopy conducted only for biopsy-for histological diagnostic confirmation. If the first produced jezofozagoskopiju, Visual changes in the mucosa was not found-the tumor was small and was in the thick of the mucous membrane. And then, to prevent error diagnostic conducted parallel x-ray examination and by characteristic symptoms (rigidnoe narrowing clearance, local thickening of the wall and the cliff of Peristaltic waves) establish the diagnosis. The author stresses the importance of cancer awareness in identifying early stages of cancer of the esophagus.

**The Purpose of the Study:** Reflect the importance of the parallel application of ray-tracing method of esophagus after ezofagoskopia, if the tumor is not detected, and early clinical symptoms of cancer of the body available.

**Keywords:** esophagus cancer, parallel, radial, visual, early diagnosis.

## INTRODUCTION

Esophageal cancer is among the most severe of oncological processes [1.3]. The life expectancy of the first symptoms of the disease and to death is 7-12 months [2.5]. Extension of the life of the patient prior to 2.5 years is considered an achievement [3]. Such aggression of this disease can be explained by peculiarities of the localization of the esophagus in the mediastinum, close contact with zhiznennovazhnymi authorities, resulting in the rapid germination of cancer beyond its own tissues as well as metastasis [1.7]. Early diagnosis of this tumor can successfully fight for the extension of the life of the patient [4]. Surgical treatment of esophageal cancer is possible only if the early recognition of the disease. However, such manifestnyj symptom as dysphagia usually appears with inoperable tumors [3.4]. Therefore, your doctor will need to exercise due caution to cancer

when the patient salivation and impotence, and they are early symptoms of esophageal cancer, immediately proceed to search for their causes [1.2]. Currently, to assess the status of the lumen of the esophagus, both radiotherapy and endoscopic method study. When first produced, the radiography by nature deformation of lumen of the esophagus, or installed a diagnosis or assumption about the presence of cancer. In these cases, esophagoscopy is to biopsy for histological diagnostic confirmation. If the first produce jezofozagoskopiju, the Visual changes in the lumen of the esophagus can not find-small-size tumor and be thicker mucous membranes. And then, to prevent errors, diagnostic should be carried out parallel x-ray examination, and by characteristic symptoms (rigidnoe narrowing clearance, local thickening of the wall and the cliff of Peristaltic waves) to establish the diagnosis. In unclear cases, to diagnose cancer of the body, have resorted to computed tomography and double kontrastirovaniju

of the esophagus (after the introduction of gas into the mediastinum).

### MATERIAL AND METHODS

In various hospitals watched 711 patients with cancer of the esophagus. Their age was from 18 to 93 years. Men were almost 2.5 times more than women. During the primary beam survey of esophageal cancer was discovered at 591 (83.1%) patient. All of them had been clearly expressed and authority clearance dysphagia narrowed due to the bumpy tumors. The remaining 120 (16.9%) patients on admission was made primarily esophagoscopy. Of these, 89 (12.5%) diagnosed with a cancerous tumor, and a biopsy was taken, and 31 of the patient, which is about 4.4% of the total number of patients, the tumor was not found, but they have had other symptoms salivation, inherent to the initial stages of cancer of the body. This required the use of parallel x-rays that revealed the cancer. First apply basic radiography, which has narrowing of the esophagus with smooth contours in one or another of his Department, followed by computed tomography was performed with the introduction or without introducing a gas into the mediastinum. At 8 patients after pnevmomediastinuma have double contrast of the esophagus. After a radiation survey of the purported hotbed of malignancy tissue biopsy was taken for histological substantiation of operation.

### Result

Described by Ray and Visual Studies have all these patients (31) reveal a tumor of the esophagus. The tumor was localized in the lower half and not prorastala into the surrounding soft tissue. This allowed them to perform radical grafting operation of esophagus stomach or gut poperechnoobodochnoj. Macroscopic and microscopic studies of the drug showed that the esophagus was formed of squamous cell carcinoma with invasive growth. After surgery (13%) and 4 deaths patients over the age of 60 years (from acute cardiovascular insufficiency).

### DISCUSSION

Esophageal cancer remains one of the challenges of Oncology. The initial symptoms of this disease, the patients typically do not pay due attention, linking them with violation of the diet and other domestic factors, and only after the occurrence of dysphagia go to the doctor, but this symptom is indicative of neglect of the process. They have diagnosed the first radiation or

Visual examination of the esophagus. And quite another thing when a patient calls a doctor with early-erased symptoms of this disease. That's when the doctor's cancer awareness is crucial in determining patient causes and salivation and other early symptoms of the disease. Often they first conducted esophagoscopy, but it does not let you visually examine the tumor if it is in small size and thicker mucous membranes of the body. In these cases, the doctor should not rest, and to carry out parallel beam survey since may already have x-ray signs of cancer of the esophagus. This is evidenced by the above figures.

### CONCLUSION

In the development of esophageal cancer at first observed salivation, weight loss, weakness, impotence and other erased symptoms. Dysphagia reflected heat illness and even her neglect. Therefore, early diagnosis of the disease is important and cancer awareness and knowledge of the described symptoms. With timely treatment the patient to the doctor when he has no dysphagia, but there are other symptoms salivation and erased, need to resort to a parallel beam and endoscopic study because visually the esophagus, as it were, is not changed, but the beam study reveals tumor in the initial stages of its development. So to succeed in getting rid of diagnostic errors in a timely manner and to perform the operation.

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