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Accurate diagnosis is important for appropriate treatment of any disease

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Dr. Prashant Chhajed is a recognized expert in all facets of bronchoscopy and pleuroscopy (medical thoracoscopy) with a keen interest in sleep apnea and transcutaneous carbon dioxide monitoring.

Dr. Prashant Chhajed has been an active clinical researcher in the area of Interventional Pulmonology, Interstitial Lung Disease, Obstructive Airways Disease and Lung Transplantation. He has been an invited lecturer at numerous national and international meetings, and he is a well-recognized teacher and has been a faculty in numerous bronchoscopy and interventional workshops around the world.

Dr. Chhajed has published more than 139 scientific publications in PubMed indexed journals. He has presented numerous abstracts of his research at national and international meetings, and has received numerous awards for his research presentations. In 2000 he received the Clinical Prize for Research Excellence at the 10th Annual St Vincent's Research Symposium, Sydney and in 2004 the "CHARAK Award" for Achievements in Medical Research, Red Swastik Society of India, Mumbai out of many other significant ones.

Dr. Chhajed who is also an HOD of Respiratory Medicine, SL Raheja Hospital, Mahim and Hiranandani Hospital, Vashi, recently organized 12th Interventional Pulmonology League 2018 with an aim of creating a platform that talks about the advancements in technology for patient treatment and revolutionize the field of Pulmonology in India. BioSpectrum spoke to him during this conference. Edited excerpts-

How will this event help in providing better treatment to Indian patients?

This event dominantly discussed the developments in Pulmonary Medicine, particularly Interventional Pulmonology techniques, which are now available in India. This event was an education platform for Chest Physicians all across India, who could gain knowledge and take it back to their respective places, to help their patients.

The Endobronchial Ultrsound was first launched in Western India at Hiranandani Hospital, Vashi, 8 years ago. Can you throw some light on Endobronchial Ultrasound?

Endobronchial Ultrasound Guided Transbronchial Needle Aspiration (EBUS TBNA) is a technique that permits to take diagnostic specimens from the Mediastinal and Hilar Lymph Nodes. This procedure is performed under local anesthesia and sedation, in a day care setting. This procedure has revolutionized the ability to have a diagnosis (either pathological or microbiological) in patients with Mediastinal and/ or Hilar Lymphadenopathy.

How can these techniques be helpful in the diagnosis of diseases?

These techniques aid in the diagnosis of Pulmonary Diseases. An accurate diagnosis is important for appropriate treatment of any disease.

How can it help in diagnosis of drug-resistant TB?

Prior to the advent of EBUS TBNA it was challenging to get diagnostic biopsy specimens from enlarged Mediastinal Lymph Nodes. EBUS TBNA has become an important test to confirm the diagnosis (cause of Mediastinal Lymph Node enlargement – e.g. Tuberculosis (TB) or Malignancy). The samples are subjected to TB Genexpert and TB culture, which permit the diagnosis of Tuberculosis including Drug Resistant Tuberculosis.

What are the current trends in the field of Pulmonary medicine?

There have been remarkable developments in the field of Pulmonary Medicine in the last decade, which have clinical applications. EBUS TBNA is already discussed above. Further, Pleuroscopy is an important development as a procedure performed under local anesthesia and sedation, in patients with undiagnosed Pleural Effusion (fluid collection in the chest cavity). Rigid Bronchoscopy permits removal of tumor in the airway endoscopically, using thermal energy as well as placement of airway stents in patients with narrowing of airways. Newer techniques that have been recently implemented are Cryo Lung Biopsy for diagnosis of Lung malignancy as well as Interstitial Lung Diseases (ILD). Also, Bronchial Thermoplasty has been introduced as a treatment option for severe Asthma.