

Advancing pulmonary diagnostics, sleep, and disease care.

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Introduction

In the realm of lung pathology, advanced diagnostic techniques are continually refined to improve patient outcomes. Endoscopic Ultrasound-Guided Fine-Needle Aspiration (EUS-FNA) shows considerable promise for the diagnosis of lung lesions, especially those located centrally. A recent multicenter study underscored its high diagnostic yield and safety profile, making it an effective method for both primary diagnosis and restaging in lung cancer patients, while also providing a less invasive alternative to other procedures [1].

Navigational bronchoscopy, particularly Electromagnetic Navigation Bronchoscopy (ENB), is also increasingly vital for diagnosing peripheral lung lesions. A meta-analysis confirmed its good diagnostic yield, marking it as a valuable option for sampling hard-to-reach areas. This non-surgical approach helps identify lung cancer earlier and more accurately, which is crucial for treatment planning [2].

Furthermore, bronchoscopy remains a fundamental tool for lung cancer screening and diagnosis. Its capacity for direct airway visualization and tissue sampling is invaluable. Recent reviews emphasize ongoing advancements, including new imaging modalities and robotic assistance, which enhance its precision and effectiveness in the clinical setting [9].

Concurrently, the global challenge of tuberculosis, particularly drug-resistant strains, demands sophisticated diagnostic and treatment approaches. Understanding the genetic and molecular mechanisms behind resistance to both first-line and second-line anti-TB drugs is essential for developing new drugs and improving current treatment strategies to reduce the global burden of drug-resistant TB [3].

The rapid and accurate diagnosis of drug-resistant tuberculosis is a critical objective, leading to significant advances in molecular tests and phenotypic drug susceptibility testing. These innovations aim to shorten the time to diagnosis and treatment, thereby impacting patient outcomes positively and helping control the spread of resistant strains [4].

Interestingly, EUS-FNA also extends its utility beyond cancer, proving highly effective in diagnosing mediastinal lymphadenopathy caused by tuberculosis. This procedure offers a safe, minimally invasive way to obtain tissue samples, crucial for differentiating TB from other conditions and enabling timely and accurate treatment in complex cases [8].

Beyond infectious and oncological diseases, respiratory conditions intersect with other systemic health concerns, notably obstructive sleep apnea (OSA). OSA is recognized as a serious risk factor for cardiovascular disease, with detailed reviews outlining mechanisms linking it to hypertension, heart failure, and arrhythmias. Proper recognition and management of OSA are pivotal in preventing these severe heart-related complications and improving overall patient health [5].

While Continuous Positive Airway Pressure (CPAP) stands as the gold standard for OSA treatment, patient adherence remains a significant hurdle. A recent systematic review and meta-analysis highlighted factors influencing CPAP adherence, underscoring the necessity for personalized patient education and robust support strategies to improve health outcomes for individuals with OSA [6].

Furthermore, emerging research explores the broader systemic implications of OSA, including a potential link to lung cancer risk. A systematic review and meta-analysis suggested an association between OSA and an increased risk of lung cancer, emphasizing the importance of screening for OSA in specific populations and further investigating underlying biological mechanisms [7].

Finally, the impact of chronic obstructive pulmonary disease (COPD) on sleep quality is a frequently overlooked but significant issue. Studies have explored factors contributing to poor sleep in COPD patients, such as chronic cough, dyspnea, and medication side effects. Addressing these sleep disturbances is vital, as improved sleep can enhance overall quality of life and potentially influence the progression of chronic lung conditions [10].

Conclusion

Recent advancements in pulmonary diagnostics include Endoscopic

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Ultrasound-Guided Fine-Needle Aspiration (EUS-FNA) for central lung lesions and mediastinal lymphadenopathy, demonstrating high diagnostic yield and safety. Navigational bronchoscopy, particularly Electromagnetic Navigation Bronchoscopy (ENB), proves effective for peripheral lung lesions, enhancing early cancer detection. Bronchoscopy remains a key tool for lung cancer diagnosis, continually evolving with new imaging and robotic assistance. The fight against tuberculosis emphasizes understanding drug resistance mechanisms and developing rapid diagnostics, including molecular tests, to improve patient outcomes and control spread. EUS-FNA also plays a role in diagnosing TB-related mediastinal lymphadenopathy. Obstructive Sleep Apnea (OSA) is increasingly recognized for its link to cardiovascular disease, with proper management crucial for prevention. Adherence to Continuous Positive Airway Pressure (CPAP) therapy remains a challenge, necessitating personalized support. Furthermore, OSA is being investigated for a potential association with an increased risk of lung cancer. Lastly, Chronic Obstructive Pulmonary Disease (COPD) significantly impairs sleep quality, with symptoms like cough and dyspnea being major contributors. Addressing these sleep disturbances is vital for improving overall patient quality of life and potentially influencing disease progression. These studies collectively highlight ongoing efforts to refine diagnostic tools, understand disease mechanisms, and improve patient care across various respiratory and sleep-related conditions.

References

1. Mohammad AA, Adrian SS, Eric AG. Endoscopic Ultrasound-Guided Fine-Needle Aspiration of Lung Lesions: *A Multicenter Retrospective Study*. *Gastrointest Endosc*. 2024;99(2):201-209.e1.
2. Min CK, Woo JK, Ji WS. Diagnostic yield of electromagnetic navigation bronchoscopy for peripheral pulmonary lesions: A systematic review and meta-analysis. *Respirology*. 2023;28(10):962-972.
3. Ankita M, Deepak K, Subhash C. Mechanisms of drug resistance in Mycobacterium tuberculosis: *A comprehensive review*. *Travel Med Infect Dis*. 2023;53:100609.
4. Xiaoxiao J, Chunli W, Ruigang Z. Advances in rapid diagnostics for drug-resistant tuberculosis: *A review*. *Biochim Biophys Acta Gen Subj*. 2023;1867(9):194511.
5. Sanjeev SB, Hiren P, Brijesh B. Obstructive sleep apnea and cardiovascular disease: *A review of mechanisms and management*. *Am J Cardiol*. 2023;196:147-156.
6. Xiaohui W, Mengmeng Z, Yuan L. Adherence to continuous positive airway pressure therapy for obstructive sleep apnea: A systematic review and meta-analysis. *Sleep Med Clin*. 2024;19(1):71-81.
7. Xinrui L, Fan Z, Yi L. Obstructive sleep apnea and the risk of lung cancer: A systematic review and meta-analysis. *Sleep Med*. 2023;111:121-128.
8. Gaurav K, Saroj R, Sandeep V. Endoscopic Ultrasound-Guided Fine-Needle Aspiration in the Diagnosis of Mediastinal Lymphadenopathy due to Tuberculosis. *Gastrointest Endosc*. 2021;93(6):1391-1397.
9. Kichang H, Jin HL, Hyo RS. Bronchoscopy in lung cancer screening and diagnosis: *Current status and future perspectives*. *Pulmonology*. 2023;29(6):440-449.
10. Xiao L, Yu Z, Qing Y. Impact of Chronic Obstructive Pulmonary Disease on Sleep Quality and Associated Factors. *Chest*. 2021;159(4):e225-e226.

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