

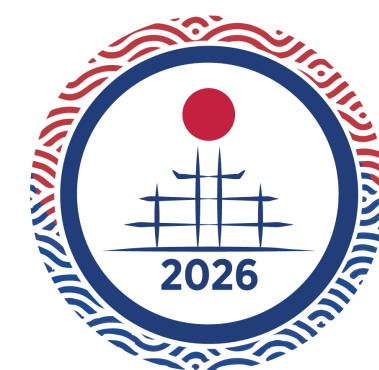


Efficacy of Fufang Bufei decoction on postoperative cough in patients undergoing lung cancer surgery: a randomized controlled trial

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INTRODUCTION

Postoperative cough following lung cancer surgery is prevalent and delays postoperative recovery and hospital discharge. Chinese herb medicine has been used to treat infectious cough with satisfactory effects. This study aimed to evaluate the preventive effect of FuFang-BuFei (FFBF) decoction on postoperative cough management.

METHODS

Design:

The current study was conducted as a randomized controlled clinical trial at the West China Hospital of Sichuan University, China. Patients undergoing primary surgical resection for lung cancer were randomly assigned (1:1) to receive FFBF or usual care.

The primary outcomes were the incidence of postoperative cough assessed at postoperative day (POD) 30. Secondary outcomes included cough incidence and severity, quality of life assessed upon discharge and at PODs 60, and 90, and hospitalization costs.

DISCUSSION AND CONCLUSION

Actionable Take Away Message

- FFBF improved postoperative symptoms and costs at discharge, supporting its potential role as an early supportive-care strategy after lung cancer surgery.

Future Direction for Research

- Future studies should define the optimal treatment window, identify responsive patients, and integrate cough phenotypes with inflammatory biomarkers for more precise postoperative symptom management.

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Artificial Intelligence (AI) Use Disclaimer

ChatGPT was used only during the preparation of the poster to optimize image layout and refine the language.

RESULTS

- Primary endpoint:** Postoperative cough incidence at POD30 was not significantly different between groups (43% vs 49%; adjusted OR=0.67, $P=0.24$).
- Early postoperative benefit:** At hospital discharge, cough incidence was significantly lower with FFBF (38% vs 51%; adjusted OR=0.47, $P=0.03$).
- Cough severity:** FFBF reduced cough severity at discharge (adjusted difference -0.68 ; 95% CI -1.16 to -0.21 ; $P=0.005$).
- Recovery-related outcomes:** At discharge, FFBF was associated with better physical function and less dyspnea and fatigue. Median hospitalization costs were also lower (¥37,580 vs ¥42,731; $P=0.0009$).

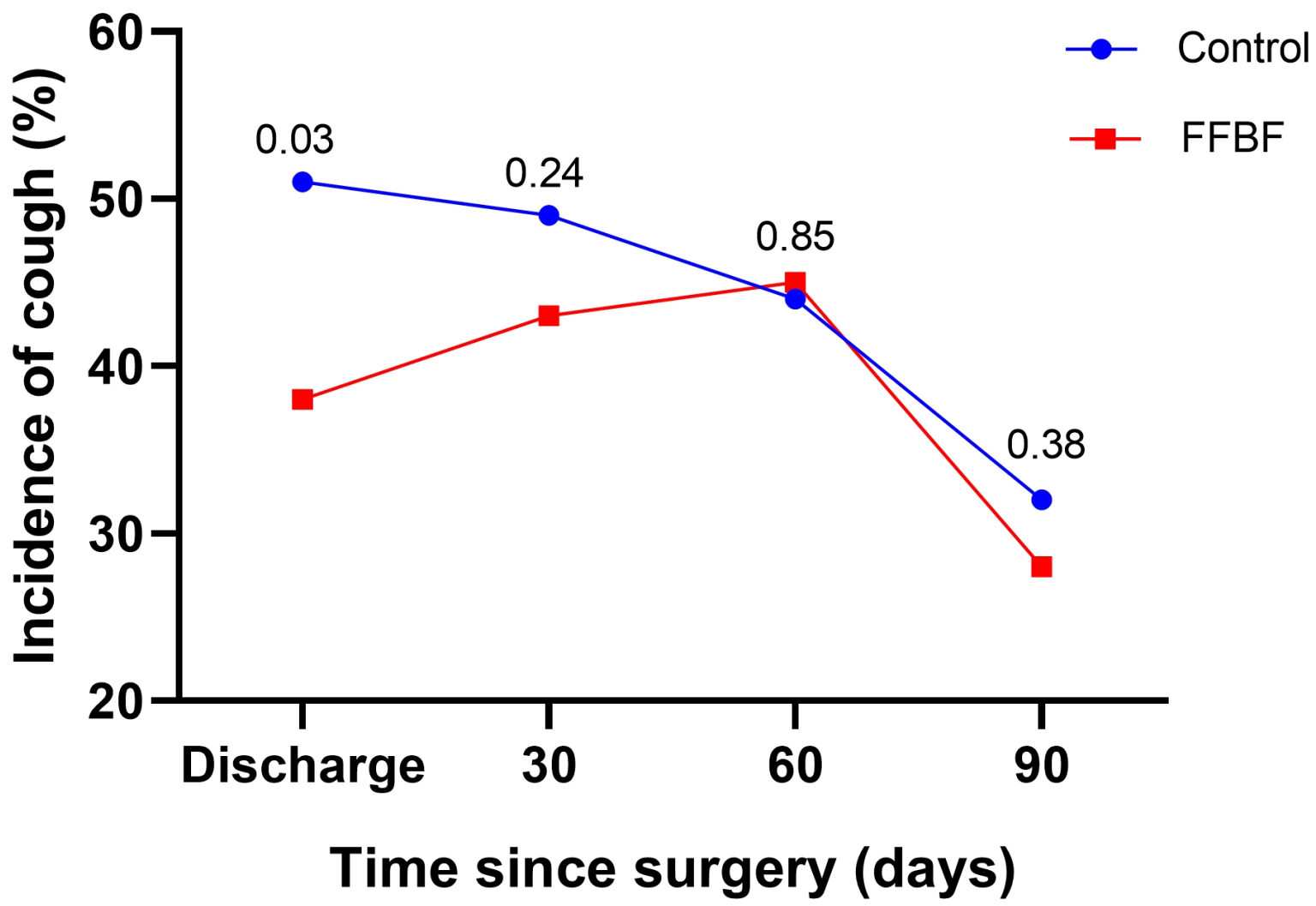


Figure 1: Postoperative cough incidence over time

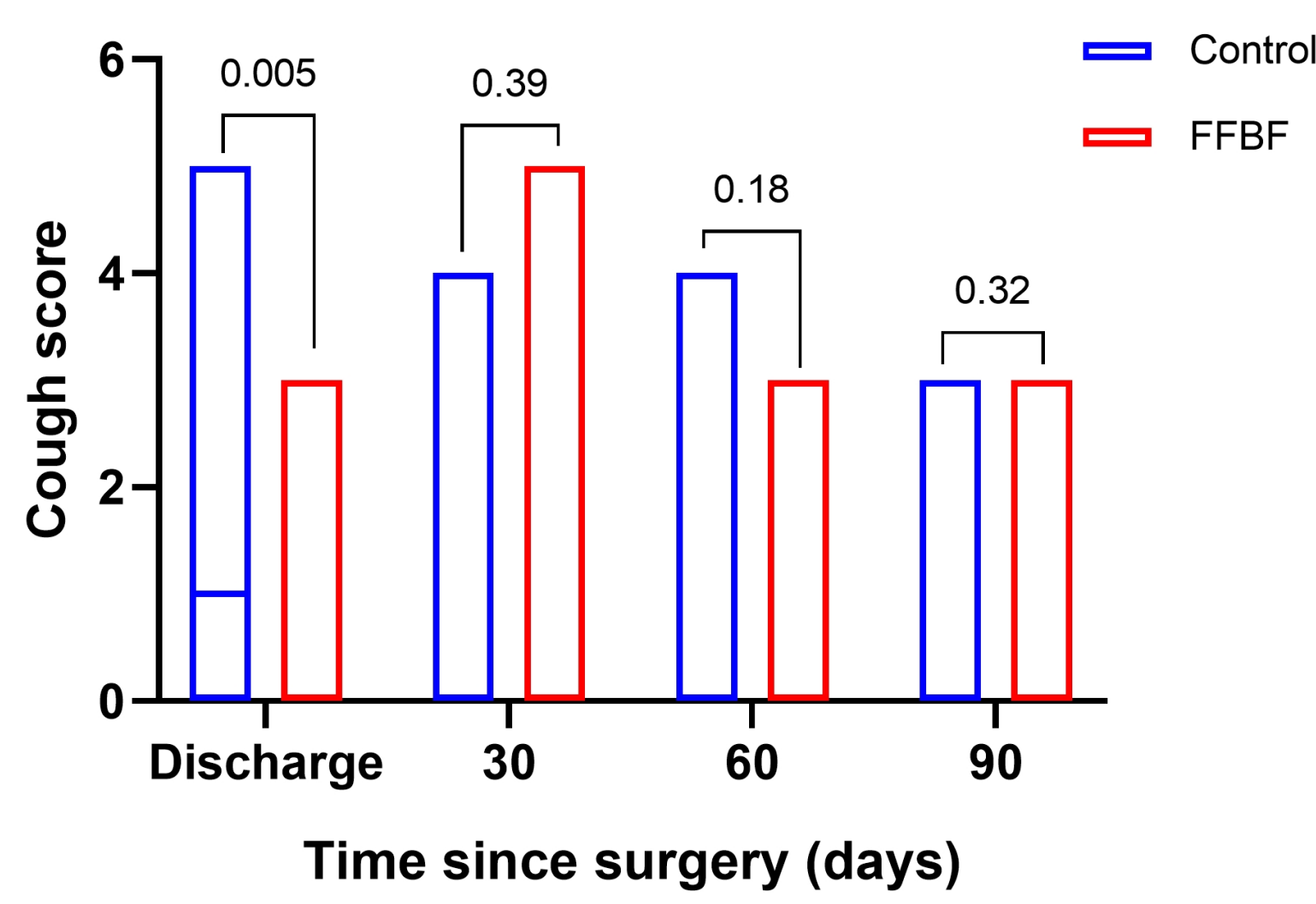


Figure 2: Cough severity over time

KEY FINDINGS



The effect was time-dependent: FFBF improved symptoms during the immediate postoperative recovery period, but the benefit was not sustained at POD30–90.