Table 3. Association between surgical approach (invasive or non-invasive) and development of postoperative pulmonary and cardiac complications according to logistic regression analysis

			Univariate Analysis		***Multivariate Analysis***	
Outcome	**Invasive approach (ALT or PLT) N=39 (78%)**	**Non-invasive approach (VATS or MT) N=11 (22%)**	**OR (95% CI)**	***P***	**OR (95% CI)**	***P***
All Respiratory complications	14 (36%)	1 (9%)	0.18 (0.01-1.08)	0.12	3.85 (0.09-299.18)	0.48
Lung infection or COPD exacerbation	10 (26%)	0 (0%)	-	-	-	-
Pneumothorax	3(8%)	1 (9%)	1.20 (0.06-10.60)	0.88	-	-
Need for non-invasive ventilation	3 (8%)	0 (0%)	-	-	-	-
Need for invasive ventilation	3 (8%)	0 (0%)	-	-	-	-
Ventilation duration (days)	0±0	0±0	-	-	-	-
Diaphragmatic Dysfunction	18 (46%)	2 (20%)	0.29 (0.04-1.35)	0.15	1.02 (0.07-12.31)	0.99
All cardiac complications	9 (23%)	0 (0%)	-	-	-	-
Duration before chest tube removal (days)	6 [4;9]	4 [2.5;4]	0.50 (0.26-0.78)	0.01*	0.67 (0.24-1.56)	0.39
Hospital length of stay (days)	14 [9;20]	6 [5;7.5]	0.47 (0.22-0.74)	0.01*	0.53 (0.24-0.88)	0.06
Need for ICU admission	12 (31%)	2 (18%)	2.0 (0.4-14.4)	0.4	-	-

Data are expressed in number (N) and percentages (%) unless otherwise indicated. *P* value for univariate or multivariate analysis. DD: Diaphragmatic Dysfunction; Persistent DD: DD present on the operated side only at D0 persisting at D3; All respiratory complications: lung or wound infection, COPD exacerbation, pleural effusion, pneumothorax, need for invasive or non-invasive ventilation; COPD: Chronic Obstructive Pulmonary Disease; All cardiac complications: rhythm disturbances, atrial fibrillation, pulmonary oedema or myocardial ischemia; ICU: Intensive Care Unit, OR: Odds Ratio; ALT: Antero-Lateral Thoracotomy; PLT: Postero-Lateral Thoracotomy, VATS: Video-Assisted Thoracoscopy, MT: Mini Thoracotomy