LINKED COLOUR IMAGING (LCI) AND BLUE LIGHT IMAGING (BLI) ROLE IN ASSESSING CHRONIC GASTRITIS STIGMATA: A PROSPECTIVE STUDY

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Blue Light Imaging demonstrated superior diagnostic accuracy for intestinal metaplasia compared to Linked Colour Imaging and white light endoscopy in a prospective study of 169 patients, with performance further enhanced by sedation.

KEY POINTS

- BLI achieved higher diagnostic accuracy for intestinal metaplasia than LCI and white light (AUROC 0.72 vs 0.66 vs 0.60, p-values 0.009 and <0.001 respectively), though with increased false positives
- Three visible lesions including one high-grade and two low-grade dysplasias were detected only with BLI assessment
- In sedated patients, BLI diagnostic accuracy for intestinal metaplasia improved further (AUROC 0.79, p<0.001 vs white light)
- BLI, LCI and white light showed similar performance for chronic gastritis and atrophy evaluation, with high rates of false positives suggesting overestimation
- The study prospectively enrolled 169 patients (mean age 60.2 years, 55.6% female) undergoing gastric biopsy mapping between November 2023 and March 2024

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