

# A NOVEL STIFFENING WIRE INCREASES THE DEPTH OF INSERTION DURING DOUBLE BALLOON ENTEROSCOPY – FINDINGS FROM A SINGLE BLIND RANDOMIZED CONTROLLED TRIAL

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Poster

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**A randomized controlled trial found that use of a stiffening wire during double balloon enteroscopy significantly increased both post-randomization insertion depth and total insertion depth compared to standard technique alone.**

## KEY POINTS

- In 54 patients undergoing double balloon enteroscopy who had not reached their target abnormality with standard technique, those randomized to stiffening wire achieved significantly greater post-randomization insertion depth than controls (135 cm versus 19 cm,  $p$  less than 0.001).
- Total insertion depth was also significantly greater in the stiffening wire group compared to control (502 cm versus 391 cm,  $p$  equals 0.015).
- There were no significant differences between groups in pain scores, types of diagnoses, or interventions performed, and two adverse events in the stiffening wire group were unrelated to the device.
- Most enrolled patients had small bowel bleeding as the indication (57 percent) and had undergone prior abnormal capsule endoscopy (83 percent).
- This single-blind trial may inform endoscopists performing double balloon enteroscopy in patients with deep small bowel pathology.

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