

ESOPHAGEAL GRANULAR CELL TUMORS: CLINICAL OUTCOMES OF DIFFERENT METHODS OF ENDOSCOPIC RESECTION

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Poster

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A retrospective study of 35 patients found that modified endoscopic mucosal resection methods achieved 100% en-bloc and 94.3% complete histologic resection of esophageal granular cell tumors without complications or recurrence, with no significant differences among techniques.

KEY POINTS

- Esophageal granular cell tumors are the second most common subepithelial tumors of the esophagus, are potentially malignant, and currently lack definite management guidelines.
- The study included 35 patients treated between 2008 and 2021; tumors averaged 7.2 mm, were predominantly asymptomatic (80%), located in the distal esophagus (77.1%), and appeared broad-based (85.7%) with whitish-to-yellowish color.
- Five endoscopic techniques were used, with ligation-assisted EMR most common (77.1%), followed by conventional, cap-assisted, and underwater EMR, and ESD.
- All resections achieved en-bloc removal with 94.3% complete histologic resection, mean procedure time of 6.6 minutes, no complications, and no recurrences during follow-up.
- No significant differences in clinical outcomes were found among the different endoscopic resection methods.

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