

RISK FACTORS FOR SUBMUCOSAL FIBROSIS DURING PER-ORAL ENDOSCOPIC MYOTOMY: A PROSPECTIVE STUDY

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UEG Week Copenhagen 2023

Poster

Oesophagus

October 15, 2023

In a prospective study of 240 achalasia patients undergoing POEM, presence of stasis esophagitis and greater esophageal width on timed barium swallow predicted significant submucosal fibrosis.

KEY POINTS

- Submucosal fibrosis was detected in 87 of 240 patients (36.3%), with significant fibrosis (grade 2 or 3) in 35 patients (14.6%).
- On multivariate analysis, presence of stasis esophagitis and width of esophagus on timed barium swallow were independent predictors of significant submucosal fibrosis.
- Type I achalasia had significantly higher rates of submucosal fibrosis (62.1%) compared to type II (33.8%) and type III (10%), $p=0.013$.
- Mean esophageal width was 4.6 ± 1.7 cm in patients with no or minimal fibrosis versus 6.1 ± 3.5 cm in those with significant fibrosis ($p=0.001$).
- This study is relevant for endoscopists performing POEM who wish to anticipate technical challenges related to submucosal fibrosis in achalasia patients.

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