

Part 1: Nageshwar Reddy - How endoscopy has changed

Duvvur Nageshwar Reddy

Podcast Episode

Endoscopy

February 25, 2026

A prominent endoscopist discusses the evolution of endoscopy from fiberoptic to video technology, argues that antibiotic resistance in India makes disposable scopes unnecessary in emerging nations, and describes the development of an unpatented stent for pancreatic fluid drainage.

KEY POINTS

- The guest identifies the transition from rigid to fiberoptic endoscopy as the single most important breakthrough, with video endoscopes introduced in the late 1980s primarily enabling team visualization rather than improving precision.
- A multi-country study published in Lancet found 83% of Indian ERCP patients harbor antibiotic-resistant gut bacteria compared to 10% in the Netherlands and 20% in Italy and the US; the guest argues this negates the infection-control rationale for disposable scopes in emerging economies.
- Over-the-counter antibiotic availability, incomplete treatment courses, and agricultural antibiotic use contribute to high resistance rates in India, prompting recent government intervention.
- The guest developed the unpatented Nagy stent in 2011 for peripancreatic fluid drainage via side-viewing endoscopy, deliberately avoiding patents to ensure low cost and widespread access; a newer 'hot' version allows direct deployment.
- The guest emphasizes that passion for procedures, compassion for patients, and willingness to subspecialize are essential for modern endoscopists, who are evolving from technicians into thinking clinicians applying randomized trials and artificial intelligence.

VIEW THIS CONTENT ON GUTFLIX

<https://gutflix.eu/search/d/3ea054e8-1220-11f1-9831-0242ac120003>



AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.