

CURATIVE OUTCOMES IN SMALL PT1 LESIONS RESECTED BY EITHER ESD OR EFTR: A NORTH-EASTERN ITALIAN EXPERIENCE

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Poster

Colorectal

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A retrospective comparison of ESD versus EFTR for small gastrointestinal pT1 lesions found no significant differences in en bloc, R0, or curative resection rates, though EFTR was more expensive.

KEY POINTS

- Among 35 ESD and 32 EFTR procedures for pT1 lesions under 30 mm, en bloc resection rates were 90% versus 96%, R0 resection rates were 83% versus 96%, and curative resection rates were 66% versus 64%, with no statistically significant differences between techniques.
- Mean procedural time was 67 minutes for ESD versus 50 minutes for EFTR, a difference that was not statistically significant.
- Adverse event rates were similar at 13% for ESD and 10% for EFTR.
- Mean procedural cost per hospitalization day was lower for ESD at 1503 euros versus 2260 euros for EFTR.
- The authors conclude that ESD should remain the gold standard in experienced settings, though EFTR may offer easier en bloc resection in challenging cases despite higher cost.

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