

UNDERWATER ENDOSCOPIC MUCOSAL RESECTION VS. ENDOSCOPIC SUBMUCOSAL DISSECTION: CAN SPEED COMPETE WITH PRECISION IN GASTROINTESTINAL LESIONS? A SYSTEMATIC REVIEW AND META-ANALYSIS

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Poster

Colorectal

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A systematic review and meta-analysis of four studies (651 patients) comparing underwater endoscopic mucosal resection (UEMR) to endoscopic submucosal dissection (ESD) found that UEMR was significantly faster but achieved lower en-bloc and R0 resection rates, with similar adverse event profiles.

KEY POINTS

- UEMR showed significantly lower en-bloc resection rates compared to ESD (OR = 0.01, 95% CI [0.01–0.06], $p < 0.00001$) and lower R0 resection rates (OR = 0.16, 95% CI [0.09–0.22], $p < 0.0001$), though R0 analysis had high heterogeneity ($I^2 = 83\%$).
- No significant difference in adverse event rates was observed between UEMR and ESD (OR = 0.48, 95% CI [0.10–2.34], $p = 0.37$), indicating comparable safety profiles.
- UEMR was 5.89 times faster than ESD ($p < 0.0001$), offering a procedural time advantage.
- The analysis included four studies (three randomized controlled trials and one cohort study) with 651 total patients, comparing UEMR and ESD for gastrointestinal lesions.
- The authors conclude that ESD remains preferable for lesions requiring en-bloc or R0 resection, while UEMR may offer time efficiency in selected cases; clinicians and researchers interested in endoscopic resection techniques would benefit from this comparative data.

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