

ENDOSCOPIC SUBMUCOSAL DISSECTION TO TREAT LESION LOCATED ON ILEOCAECAL VALV: A MULTICENTER RETROSPECTIVE STUDY

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UEG Week Copenhagen 2023

Poster

Colorectal

October 15, 2023

Endoscopic submucosal dissection for ileocecal valve lesions in 116 patients achieved 78.4% R0 resection rate with 6.0% complication rate in three expert centers.

KEY POINTS

- En bloc resection was achieved in 93.9% of cases and curative resection in 74.1% of patients, with median lesion diameter 45 mm and 44.8% invading the terminal ileum over 10 mm.
- Ileal involvement, anal lip involvement, and coverage of more than 50% of the valve circumference were statistically significant predictors of failed R0 resection.
- Postoperative complications occurred in 6.0% of patients, including six delayed bleeding events and one perforation requiring surgical management.
- The authors suggest ESD could be proposed in expert centers as a first-line option for treating ileocecal valve lesions, though specific anatomic factors predict higher failure rates.

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