ROLE OF DETECTIVE FLOW IMAGING ENDOSCOPIC ULTRASOUND (DFI-EUS) IN THE ASSESSMENT OF PANCREATIC SOLID LESION

Francesco Di Matteo

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Detective Flow Imaging-EUS (DFI-EUS), a contrast-free microvascularization technique, showed 88% agreement with contrast-enhanced EUS and 93% sensitivity for pancreatic adenocarcinoma in a prospective study of 100 patients.

KEY POINTS

- In 100 consecutive patients undergoing EUS-FNB for pancreatic lesions (mean size 29±13 mm, 69% adenocarcinoma), DFI-EUS classified 69% as grade 0 (hypo/avascular), 20% as grade 2 (hypervascular), and 11% as grade 1 (isovascular).
- DFI-EUS demonstrated 93% sensitivity (95% CI 84-97%) but only 50% specificity (95% CI 30-70%) for diagnosing pancreatic adenocarcinoma.
- Agreement between DFI-EUS and contrast-enhanced EUS was strong, with an intraclass correlation coefficient of 88% and Cohen's Kappa of 0.74.
- DFI-EUS provides microvascularization assessment without contrast agents, avoiding the prolonged procedure time and additional costs associated with contrast-enhanced EUS.
- Among the 69 adenocarcinomas, 85.5% showed concordant hypoenhancement on contrast-enhanced EUS and grade 0 on DFI-EUS, with only 8 lesions showing discrepancy between techniques.
- This was a single-centre study without interobserver agreement assessment; the authors noted the preliminary results require validation in larger multicentre studies.

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