gutflix
GI learning, personalised

Summary

ENDOSCOPIC BAND LIGATION VERSUS CLIPPING FOR DIVERTICULAR BLEEDING: A SYSTEMATIC REVIEW WITH META-ANALYSIS

Giuseppe Losurdo

UEG Week Copenhagen 2023 | Poster

Colorectal

October 16, 2023

A meta-analysis of seven studies with 2322 patients found that endoscopic band ligation and clipping achieve similar immediate hemostasis for diverticular bleeding, but band ligation reduces early and late rebleeding rates.

KEY POINTS

- Immediate hemostasis was achieved in 96.8% with endoscopic band ligation and 96.5% with clipping, showing no significant difference between techniques.
- Early rebleeding occurred significantly less often with band ligation (11.8%) compared to clipping (25.0%), with an odds ratio of 0.40 favoring band ligation.
- Late rebleeding was lower with band ligation (24.5%) than clipping (37.4%), and band ligation required fewer salvage surgeries or embolizations (0.53% versus 1.48%).
- This meta-analysis may inform endoscopists managing acute diverticular bleeding regarding technique selection for sustained hemostasis.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/415be790-743b-11ee-8b94-0242ac140004

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.