

THE ROLE OF MAGNIFIED ENDOSCOPY IN UPPER-GI PRECANCEROUS CONDITIONS SURVEILLANCE: A RETROSPECTIVE ANALYSIS

Guido Manfredi

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Poster

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A retrospective study of 96 patients undergoing surveillance endoscopy found that magnification endoscopy detected more advanced precancerous gastric lesions and both dysplastic lesions identified compared to standard endoscopy, with stronger correlation between endoscopic and histological grading.

KEY POINTS

- In 96 patients undergoing upper GI surveillance, 42 received magnifying endoscopy and 54 received standard endoscopy, with endoscopic images reviewed by three blinded expert endoscopists.
- Magnifying endoscopy identified significantly more patients with advanced precancerous stages (15 of 42 patients, 35.7%) compared to standard endoscopy (3 of 54 patients, 5.6%; $p < 0.001$).
- Both dysplastic lesions detected in the study (2 of 96 patients) were identified using magnifying endoscopy.
- Correlation between endoscopic grading (EGGIM) and histological staging (OLGA/OLGIM) was statistically significant in both groups but stronger with magnification ($p < 0.001$ versus $p = 0.02$).
- The authors conclude magnification is highly effective for surveillance of upper GI precancerous conditions, though note potential selection bias from the retrospective design.

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