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Summary

NOVEL TREATMENT OF COMBING EFTR AND LIGS IS SAFER AND LESS INVASIVE TECHNIQUE FOR GASTRIC SUBMUCOSAL TUMOR.

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Oesophagus

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A case series describes a combined technique of endoscopic full-thickness resection with laparoscopic intragastric surgery suturing (EFTR-LIGS) for gastric submucosal tumors in two patients.

KEY POINTS

- EFTR-LIGS combines endoscopic full-thickness resection with laparoscopic intragastric suturing through a single port created directly into the stomach, addressing limitations of endoscopic suturing alone which is expensive and technically difficult
- Two cases are presented: a 76-year-old man with bleeding gastric GIST requiring emergency surgery where clot prevented endoscopic suturing, and a 75-year-old woman with gastric GIST who developed pharyngeal laceration during tumor retrieval
- Average suture time for the laparoscopic intragastric component was 5 minutes with no complications and average postoperative length of stay of 5 days
- The authors characterize EFTR-LIGS as minimally invasive, safe, not difficult, and inexpensive compared to alternative approaches for gastric submucosal tumors

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