

MULTICENTER VALIDATION OF THE ENDOSCOPIC GRADING OF GASTRIC INTESTINAL METAPLASIA (EGGIM): COMPARISON WITH OLGIM FOR GASTRIC CANCER RISK STRATIFICATION

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Poster

Oesophagus

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A prospective European validation study of 252 patients demonstrates that the endoscopic grading of gastric intestinal metaplasia (EGGIM) score accurately predicts high-risk histological OLGIM stages with an area under the ROC curve of 0.90.

KEY POINTS

- The EGGIM score (range 0–10) is based on the extent of gastric intestinal metaplasia across five anatomical sites: the lesser and greater curvatures of the antrum and corpus, and the incisura.
- An EGGIM cut-off of ≥ 5 detected OLGIM stages III–IV with 85% sensitivity and 89% specificity (AUC 0.90, 95% CI 0.79–0.93, $p < 0.001$).
- The study included 252 patients (median age 60 years, 57.4% female) from two European consortia: AIDA (GIM surveillance, neoplasia treatment, and healthy controls) and TOGAS (cancer screening and polyp surveillance).
- Procedures were performed at eight academic centres by expert and non-expert endoscopists using high-resolution white-light and virtual chromoendoscopy.
- The EGGIM scoring system may streamline gastric cancer surveillance by reducing the need for biopsies and enhancing endoscopic risk stratification.

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