

DEVICE ASSISTED ENDOSCOPIC FULL THICKNESS RESECTION IN COLORECTUM: A SYSTEMATIC REVIEW AND META-ANALYSIS

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Poster

Colorectal

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A systematic review and meta-analysis of 29 studies with 3467 patients found that device-assisted endoscopic full-thickness resection achieved R0 resection in 81.6% of colorectal lesions, with major adverse events requiring surgery in 2.5% of cases.

KEY POINTS

- R0 resection was achieved in 81.6% of all lesions and 94.3% of sub-epithelial lesions, with technical success in 87.1% of procedures.
- Lesions were located in right colon (47.5%), left colon (28.6%), and rectum (24.3%), with pooled mean lesion size of 16.6 mm.
- Adverse events occurred in 12.1% of cases, with major adverse events requiring surgery in 2.5% of procedures.
- At pooled mean follow-up of 6.7 months, the recurrence rate after EFTR was 9.2%.
- The authors conclude that device-assisted EFTR is a safe and effective treatment option for colorectal lesions, though comparative studies with conventional resection techniques are needed.

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