

SPORADIC DUODENAL ADENOMAS: AN ALERT ON ASSOCIATED RISK FACTORS

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Poster

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A retrospective case-control study of 41 patients with sporadic duodenal adenomas identified smoking and family history of gastrointestinal neoplasia as potential risk factors, with significantly higher rates of concurrent colorectal adenomas.

KEY POINTS

- The prevalence of sporadic duodenal adenomas was 0.22% in upper endoscopies over 10 years, with mean patient age of 69 years and 24 males in the 41-patient cohort.
- Smoking was significantly associated with duodenal adenomas ($p = 0.037$), and family history of gastrointestinal neoplasia was related to occurrence ($p = 0.043$), with the adenoma group having significantly more affected family members ($p = 0.001$).
- Patients with duodenal adenomas had significantly more colorectal adenomas compared to age- and gender-matched controls ($p < 0.001$).
- Most adenomas were endoscopically removed (68.3%), three patients had recurrent adenomas, and one progressed to adenocarcinoma.
- The authors conclude that the potential for recurrence and malignant progression warrants surveillance and that colorectal screening may be important in this population.

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