

EFFICACY OF IMAGE ENHANCED ENDOSCOPY USING A NOVEL DOUBLE BALLOON ENTEROSCOPE FOR VISIBILITY OF SMALL BOWEL LESIONS

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Poster

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A retrospective study of 49 patients evaluated image-enhanced endoscopy with the novel EN-840T double-balloon enteroscope and found that linked color imaging improved visibility of small bowel lesions compared to white light imaging.

KEY POINTS

- Linked color imaging (LCI) improved visibility scores for most small bowel lesions compared to white light imaging, including vascular lesions (80%), erythema (80%), erosions (76%), tumorous lesions (72%), and ulcerations (69%), with no lesions showing decreased visibility.
- Color difference analysis of small reddish lesions showed LCI produced significantly higher color contrast than white light imaging for angioectasia (25.2 vs. 20.6, $P < 0.001$), erythema (25.3 vs. 19.8, $P < 0.001$), and all reddish lesions combined (25.3 vs. 20.1, $P < 0.001$).
- Blue laser imaging (BLI) demonstrated visibility scores equivalent to white light imaging for the majority of lesions and showed no significant difference in color contrast compared to white light imaging.
- The single-center retrospective study at Hiroshima University Hospital included 49 patients (median age 55 years) who underwent double-balloon enteroscopy using the EN-840T between March and July 2024, evaluating 120 lesions (71 inflammatory, 39 tumorous, 10 vascular).
- This work represents the first evaluation of image-enhanced endoscopy efficacy for small bowel lesions beyond the duodenum, as conventional double-balloon enteroscopes lacked this functionality.

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