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Summary

ENDOSCOPIC SMALL BOWEL SURVEILLANCE IN PATIENTS WITH SHORT BOWEL SYNDROME IN TREATMENT WITH TEDUGLUTIDE

Luca Elli

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Double-balloon enteroscopy is feasible and effective for small bowel surveillance in short bowel syndrome patients receiving teduglutide treatment, with a 75% total enteroscopy rate and no adverse events in a nine-patient series.

KEY POINTS

- In nine SBS patients undergoing teduglutide treatment who had DBE surveillance, no adverse events occurred and total enteroscopy was achieved in 75% of procedures (80% anterograde, 50% retrograde).
- No small bowel malignancies were detected during the study period, though concerns exist regarding small bowel polyps and cancer risk in teduglutide-treated patients.
- DBE allowed estimation of residual small bowel length in all cases where this was unknown and revealed different residual length compared to surgical records in 44% of patients.
- The median interval from teduglutide prescription to DBE surveillance was 9.1 months, with procedures performed under procedural sedation at a tertiary referral center.
- This study may interest gastroenterologists managing SBS patients on teduglutide who are considering surveillance strategies for small bowel neoplasia.

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