gutflix
GI learning, personalised

Summary

Serrated polyposis syndrome: Watch carefully

Luigi Ricciardiello

UEG Week Barcelona 2026 | Presentation

Surgery | Endoscopy | Colorectal

October 20, 2026

Serrated polyposis syndrome is the most common polyposis syndrome and is commonly underdiagnosed, requiring cumulative polyp counting across colonoscopies and dedicated surveillance in expert centers to manage the elevated colorectal cancer risk.

KEY POINTS

- The speaker stated that SPS is diagnosed using WHO 2019 criteria requiring either at least 5 serrated lesions proximal to the rectum all greater than 5 mm with at least 2 being 10 mm or larger, or more than 20 serrated polyps of any size throughout the colon with at least 5 proximal to the rectum, with counts cumulative over a lifetime.
- Colorectal cancer risk was reported as approximately 15% at diagnosis, dropping to 2.8% during surveillance after polyp clearance, though cumulative advanced neoplasia incidence remains high at 44% at 5 years even under strict surveillance.
- In FIT-based screening programs, the speaker reported 1 in 300 patients have SPS, and in one study 20% of referred patients already had sufficient data in prior records to make the diagnosis but it had been missed.
- Fifty percent of cancers in SPS develop distally with classic adenoma features rather than proximal BRAF-mutated lesions, requiring careful examination of the entire colon not just proximal segments.
- ESGE guidelines recommend 1-year surveillance intervals after clearance if at least one advanced polyp or at least 5 non-advanced clinically relevant polyps are found, or 2-year intervals if no advanced polyps or fewer than 5 non-advanced clinically relevant polyps, though the speaker noted risk stratification strategies are evolving.
- The speaker recommended that SPS should be managed in dedicated expert centers with excellent recall systems and expertise in polypectomy, as non-expert centers tend to refer patients to surgery too early when most can be managed endoscopically.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/2f083b46-d150-11f1-9e4e-daaa6dbee0a2

AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.