ENDOSCOPIC ULTRASOUND-GUIDED GASTROENTEROSTOMY USING A PARALLEL ENTERIC TUBE FOR LUMINAL DISTENSION: PROSPECTIVE MULTICENTER PROCEDURAL STANDARDIZATION

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A prospective multicenter study of 65 patients standardized PET-assisted endoscopic ultrasound-guided gastroenterostomy into 4 tasks and 10 subtasks, achieving 98.5% technical success with similar outcomes between expert and non-expert advanced endoscopists.

KEY POINTS

- Technical success was 98.5% and clinical success was 83.3%, with adverse events in 15.4% of patients (2 mild, 7 moderate, 1 severe) and no difference in success or adverse event rates between expert and non-expert endoscopists.
- The procedure was standardized into 4 tasks (PET placement, endoscope exchange, small bowel distention and targeting, LAMS placement) with 5 essential subtasks having established methodology including guidewire and PET placement, endoscope exchange, delivery system insertion and LAMS deployment.
- Median procedure time was 26.2 minutes overall, but non-experts required longer procedure times (35 vs 21.8 minutes, $p<0.001$) and higher injected fluid volumes (510 vs 415 ml, $p=0.01$) compared to experts.
- The study included 65 consecutive adult patients with unresectable malignant gastric outlet obstruction treated by seven endoscopists between August 2019 and April 2021 across multiple centers.

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