

EXPLORING THE POTENTIAL OF ARTIFICIAL INTELLIGENCE IN ASSESSING THE RISK OF GASTRIC NEOPLASTIC LESIONS IN PATIENTS WITH CORPUS ATROPHIC GASTRITIS

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Presentation

Digestive Oncology

Endoscopy

Stomach & H. Pylori

Oesophagus

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A novel One-Class Support Vector Machine model identified baseline clinical, endoscopic, and histological variables associated with gastric neoplastic lesion development in 103 corpus atrophic gastritis patients followed for a median of 60 months.

KEY POINTS

- During median 60-month follow-up, 22 of 103 corpus atrophic gastritis patients developed gastric neoplastic lesions: 13 epithelial lesions (adenocarcinoma or dysplasia) and 9 type-1 gastric neuroendocrine tumors.
- Parietal-cell-antibodies and pepsinogen-I less than 30 micrograms per liter were associated with both epithelial neoplastic lesions and type-1 neuroendocrine tumors.
- Age greater than 60 years and antral inflammation were linked to epithelial neoplastic lesions, while low-dose aspirin showed an inverse association with epithelial lesions.
- Anti-thyroperoxidase-antibodies, smoking, and dyspeptic symptoms at diagnosis were linked to type-1 neuroendocrine tumors, while H. pylori eradication therapy showed an inverse association.
- This is the first study applying a Support Vector Machine model to simultaneously consider clinical, endoscopic, and histological characteristics for risk stratification in corpus atrophic gastritis, though the authors acknowledge the need for improved variable standardization and data balancing.

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