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Summary

THE FEASIBILITY OF THE STRIP BIOPSY OF THE COLORECTAL LESIONS INVOLVING THE APPENDICEAL ORIFICE

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Colorectal

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A retrospective study of 10 patients found that strip biopsy technique using a 2-channel scope achieved en bloc resection of all appendiceal orifice lesions less than 15 mm without complications.

KEY POINTS

- Strip biopsy involves inserting a 2-channel scope with snare and grasping forceps, grasping the appendiceal end of the lesion with forceps held in the snare, then snaring and resecting the lesion after confirming the distal border.
- All 10 lesions (8 sessile serrated lesions and 2 low-grade tubular adenomas) were resected en bloc with median treatment time of 10 minutes and no complications observed.
- Pathology margins were negative in 8 cases and unknown in 2 cases, with no endoscopic residual lesions detected.
- The authors conclude that strip biopsy appeared safe and could be one option for endoscopic treatment of appendiceal orifice lesions, which are technically challenging for conventional ESD and EMR due to thin wall and narrow working space.

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