

THE POTENTIAL OF URINARY AND FAECAL AMINO ACID PROFILES AS BIOMARKERS FOR COLORECTAL NEOPLASIA IN LYNCH SYNDROME - AN EXPLORATORY LONGITUDINAL STUDY

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UEG Week Berlin 2025

Poster

Colorectal

October 6, 2025

An exploratory prospective study evaluated faecal and urinary amino acid profiles for detecting colorectal neoplasia in 118 individuals with Lynch syndrome undergoing surveillance colonoscopy.

KEY POINTS

- Faecal and urinary amino acid panels demonstrated moderate diagnostic performance, with sensitivity of 75% for both sample types but specificity of only 50% for faeces and 75% for urine in detecting relevant neoplasia (colorectal cancer, advanced adenomas, advanced serrated polyps, and non-advanced adenomas).
- Specific amino acids were elevated in individuals with neoplasia: faecal taurine and urinary citrulline, threonine, and ornithine were elevated in any relevant neoplasia, while faecal taurine and tryptophan were elevated in advanced neoplasia specifically.
- Combining amino acid profiles with faecal immunochemical test at 2.55 µg Hb/g faeces threshold did not improve diagnostic performance beyond amino acids alone.
- After polypectomy, several amino acid levels changed and reached levels comparable to individuals without neoplasia, suggesting potential utility for monitoring post-polypectomy status.
- This work may interest researchers studying non-invasive biomarkers for hereditary colorectal cancer surveillance and clinicians managing Lynch syndrome patients.

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