

# STANDARDIZING EUS-GUIDED GASTROENTEROSTOMY: A DELPHI CONSENSUS ON TECHNICAL STEPS AND ADVERSE EVENTS MANAGEMENT

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Poster

Pancreas

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**A three-round Delphi consensus among 25 international experts established agreement on key technical principles for EUS-guided gastroenterostomy in gastric outlet obstruction, while identifying areas requiring further research.**

## KEY POINTS

- Excellent agreement (>95%) was reached on the need for fluoroscopy, electrocautery-enhanced lumen apposing metal stents, and free-hand release technique.
- All panellists agreed that endoscopists performing EUS-GE should be familiar with management of adverse events such as bleeding or perforation, with excellent agreement on managing misdeployments, bleeding, and LAMS dysfunctions.
- Strong agreement (>90%) was achieved on patient positioning, sedation requirements, and preference for saline solution for jejunal distention.
- Moderate agreement (>80%) was reached on use of dye, catheter-assisted technique over endoscope- or needle-directed instillation, typical EUS-GE location, and operative space for LAMS release.
- No consensus was reached on use of contrast or choice between WEST and EPASS techniques, highlighting future research priorities in EUS-GE standardization.

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