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Summary

THE USE OF ENDOSCOPIC VACUUM THERAPY (EVT) AS COMPARED TO ENDOSCOPIC STENTING (ES) FOR LEAKAGES AFTER FOREGUT SURGERY – A MULTICENTRE COHORT STUDY

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Oesophagus

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A retrospective multi-centre study of 63 patients compared endoscopic stenting and endoscopic vacuum therapy for anastomotic leaks after foregut surgery, finding similar success rates but fewer complications with vacuum therapy despite requiring more procedures.

KEY POINTS

- Endoscopic stenting (49 patients) and endoscopic vacuum therapy (14 patients) achieved similar single-arm treatment success rates (59.2% versus 42.9%, p=0.28) for anastomotic leaks after gastrectomy and esophagectomy.
- Endoscopic vacuum therapy had significantly fewer complications (14.3% versus 46.9%, p=0.03) but required more procedures (median 6 versus 3, p=0.002) compared to endoscopic stenting.
- Healing time and defect size were similar between groups, with no significant differences observed.
- Combination therapy (stenting plus vacuum therapy) showed a trend toward higher success rates compared to single-arm treatment (p=0.07).
- This material is relevant for gastroenterologists and surgeons managing post-operative anastomotic complications in foregut surgery.

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