NEOPLASIA CHARACTERISATION IN IBD COLON: AN INTERNATIONAL MULTI-CENTRE STUDY OF ENDOSCOPIST PERFORMANCE AND A GENERIC COLON CADX ALGORITHM PERFORMANCE

Pradeep Bhandari

UEG Week Copenhagen 2023 | Poster

IBD

October 15, 2023

A generic colon computer-aided diagnosis algorithm outperformed both expert and non-expert endoscopists in distinguishing neoplastic from non-neoplastic lesions during IBD surveillance colonoscopy in a two-phase comparative study.

KEY POINTS

- The generic CADx algorithm achieved 88.89% sensitivity, 80.64% specificity, and 74.44% accuracy on 86 lesions from 20 IBD surveillance videos, compared to expert endoscopist accuracy of 68.7% to 72.0% on still images.
- Non-expert endoscopists showed particularly low specificity (49.1% to 55.3%), suggesting a risk of unnecessary biopsies or resections of non-neoplastic inflammatory lesions in IBD patients.
- Expert endoscopists achieved slightly better performance than non-experts, with accuracy ranging from 68.7% on white light imaging to 72.0% with image enhancement across 57 lesions.
- The study authors suggest that dedicated training of CADx algorithms specifically on IBD lesions could further improve characterisation and reduce unnecessary removal of non-neoplastic lesions.

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