

LEARNING CURVE FOR GASTRIC ENDOSCOPIC SUBMUCOSAL DISSECTION: EXPERIENCE IN A WESTERN CENTER

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UEG Week Copenhagen 2023

Poster

Oesophagus

October 15, 2023

A single-operator Western center study of 235 gastric ESDs found that proficiency benchmarks for en bloc and R0 resection were met from the outset, while resection speed proficiency was sustained after 73 cases globally and varied by anatomic location.

KEY POINTS

- En bloc resection rate was 100% and R0 resection rate was 97%, both meeting proficiency benchmarks from the beginning with no statistically significant differences throughout the series.
- Using CUSUM analysis, the learning curve was divided into three phases: learning phase (cases 1-48), adaptation phase (cases 49-72), and consolidation phase (from case 73 onward).
- Resection speed proficiency ($>9 \text{ cm}^2/\text{hr}$) was achieved from the beginning for antral lesions, reached a clinically significant inflection at case 49 globally, and was sustained from case 73 onward.
- Resection speed proficiency varied by anatomic location, with the gastric body requiring 134 cases to reach moving average proficiency levels.
- This study addresses the sparse evidence on ESD learning curves in the Western world where experience remains limited compared to Asia.

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