PHYSICAL RECOVERY AFTER LOCAL EN BLOC RESECTION OF LARGE RECTAL POLYPS: AN ANCILLARY STUDY OF THE RANDOMIZED TRIASSIC TRIAL

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In a randomized trial of 40 patients with large rectal polyps, endoscopic submucosal dissection achieved faster physical recovery (median 6.5 days) compared to transanal minimally invasive surgery (median 14.5 days), with post-procedural pain identified as a modifiable factor influencing recovery time.

KEY POINTS

- Median time to physical recovery measured by smartwatch step-count was 6.5 days after ESD versus 14.5 days after TAMIS, a statistically significant difference (p=0.022).
- Post-procedural pain scores were similar between techniques in the first week but significantly impacted physical activity, with each pain point increase reducing step count by 14% in both groups.
- Higher post-procedural pain was significantly associated with prolonged recovery time (p=0.001), suggesting pain management may be a modifiable target to improve outcomes.
- Larger polyp diameter (≥4cm) prolonged recovery after ESD, while female sex and polyps within 1cm of the dentate line prolonged recovery after TAMIS.
- This ancillary study of the TRIASSIC randomized trial included 40 patients (mean age 66.7 years) with median polyp size 42.5mm, of which 82.5% were benign and 17.5% were early-stage T1 rectal cancer.

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