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Summary

RESECTION OF SUPERFICIAL GASTRIC NEOPLASMS BY ENDOSCOPIC SUBMUCOSAL DISSECTION: 8-YEAR EXPERIENCE AT A TERTIARY CENTER

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UEG Week Copenhagen 2023 | Poster

Oesophagus

October 15, 2023

A prospective study of 195 patients undergoing endoscopic submucosal dissection for superficial gastric lesions found high cure rates (87.7%) with low complication (3.6%) and recurrence rates, though most recurrences occurred late at 36-48 months.

KEY POINTS

- Resection was R0 in 95.4% of cases and curative in 87.7%, with only one non-curative case lacking free horizontal margins
- Complications occurred in 3.6% of cases, including 3 intra-procedural perforations (2 treated endoscopically) and 4 cases of significant post-procedural bleeding
- Eight recurrences and 15 metachronous lesions were identified at an average of 24.1±3.4 months after the index procedure, with most recurrences (n=5) detected at 36- and 48-month endoscopies
- The authors conclude that the identification of mostly late recurrences suggests a need to develop risk assessment tools for personalized follow-up intervals
- This material is most relevant for gastroenterologists managing superficial gastric lesions and planning surveillance strategies after endoscopic resection

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