HIGH SUCCESS RATES AFTER ENDOSCOPIC VACUUM THERAPY FOR UPPER GI TRANSMURAL DEFECTS: FIRST RESULTS FROM THE DUTCH PROSPECTIVE EVT REGISTRY

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UEG Week Barcelona 2026 | Presentation

Oesophagus | Histopathology | Endoscopy | Digestive Oncology

October 19, 2026

Prospective multicenter registry of 221 patients with upper-GI transmural defects treated with endoscopic vacuum therapy achieved 77% defect closure with 7% adverse events.

KEY POINTS

- Defects were successfully closed in 77% of patients after a median of 16 days (IQR 8-26) and 4 EVT-related endoscopies (IQR 3-6).
- EVT-related adverse events (AGREE classification ≥3) occurred in 7% of patients.
- The cohort included 142 patients (64%) with anastomotic leakage after oncological surgery, 25 (11%) after benign surgery, 33 (15%) with iatrogenic defects, 12 (5%) with Boerhaave syndrome, and 9 (4%) with other non-iatrogenic defects.
- Success rates varied by indication: 96% for anastomotic leakage after benign surgery, 79% after oncological surgery, 67% for iatrogenic defects, and 58% for Boerhaave syndrome.
- EVT failure was associated with older age (p=0.004), non-anastomotic-leakage defects (p=0.003), higher perforation severity scores (p<0.001), and more collections requiring percutaneous drainage (p=0.015).
- This is the largest prospective EVT cohort to date; the speaker noted that standardized protocols and comparative trials are still needed.

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