

COMPARISON OF FORK-TIP AND FRANSEEN NEEDLES FOR ENDOSCOPIC ULTRASOUND-GUIDED FINE NEEDLE BIOPSY

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Poster

Pancreas

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A retrospective propensity-matched comparison of 22 G Fork-tip and Franseen needles for EUS-guided fine needle biopsy of solid pancreatic lesions found similar diagnostic accuracy but fewer operator changes from trainee to expert with the Fork-tip needle.

KEY POINTS

- Diagnostic accuracy was not significantly different between Fork-tip (92.4%) and Franseen (90.9%) needles in 66 propensity-matched patients per group with solid pancreatic lesions.
- The rate of operator changes from trainee to expert was significantly lower with the Fork-tip needle (9.1%) compared to the Franseen needle (24.2%, $P = 0.03$).
- Difficulty adjusting the puncture route from the duodenum and difficulty penetrating the gastric wall were the most common reasons for operator changes in both groups, occurring more frequently with the Franseen needle.
- Number of punctures, procedure time, core tissue score, blood score, technical success rate, sensitivity, specificity, and positive predictive value were similar between the two needle types.
- This study may be relevant to centers training endoscopists in EUS-FNB techniques for pancreatic lesions.

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