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Summary

EFFICACY FOR DIAGNOSES OF SCIRRHOUS GASTRIC CANCER AND SAFETY OF ENDOSCOPIC ULTRASOUND-GUIDED FINE-NEEDLE ASPIRATION: A SYSTEMATIC REVIEW AND META-ANALYSIS

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Oesophagus

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A systematic review and meta-analysis of 4 studies involving 114 patients found that endoscopic ultrasound-guided fine-needle aspiration achieved an 82.6% diagnostic yield for scirrhous gastric cancer, a subtype often missed by conventional endoscopic biopsy.

KEY POINTS

- Scirrhous gastric cancer is often difficult to diagnose with standard esophagogastroduodenoscopy biopsy, with false-negative rates reported above 50%, because it may not form obvious ulcers or tumors.
- The meta-analysis included 4 studies with 114 patients and found EUS-FNA achieved an overall diagnostic yield of 82.6% (95% CI 74.6–90.6%) for scirrhous gastric cancer with low statistical heterogeneity (I^2 = 0%).
- EUS-FNA demonstrated a diagnostic proportion of 75–100% for scirrhous gastric cancer lymph node metastasis.
- No apparent adverse events were observed across the 4 included studies.
- The authors conclude that EUS-FNA may be a useful alternative for patients with suspected scirrhous gastric cancer who cannot be definitively diagnosed by CT or endoscopic biopsy.

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