

CLINICAL OUTCOMES OF NOVEEL TECHNOLOGY FOR COLORECTAL SUBMUCOSAL DISSECTION: ANALYSIS OF POLYP SURFACE AND FIBROSIS WITH THE PROCEDURAL TIME

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UEG Week Copenhagen 2023

Poster

Colorectal

October 15, 2023

A three-year prospective cohort of 184 patients undergoing colorectal submucosal dissection with the Speedboat-RS2 multi-modality device achieved 91.5% en-bloc resection with no perforations and 2% delayed bleeding.

KEY POINTS

- En-bloc resection was achieved in 151 of 165 patients (91.5%) who completed the procedure, with mean polyp size 5.45 cm and mean surface 22.63 cm².
- Mean procedural time was 105.98 minutes, with regression analysis showing procedure duration increased by 2.271 minutes per cm² of polyp surface and 37.34 minutes when severe fibrosis was present.
- Adverse events included endoscopically controlled delayed bleeding in 3 patients (2%) and no perforations; microwave coagulation was used in all cases for hemostasis.
- Among 20 T1 cancers identified, 6 completely excised cases showed no recurrence, while 14 with adverse features had no residual malignancy at surgery though 2 patients had lymph node metastases requiring chemotherapy.
- This material is relevant for endoscopists considering advanced polypectomy techniques and device selection for colorectal submucosal dissection.

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