

A RANDOMIZED CLINICAL TRIAL TO COMPARE UNDERWATER COLD SNARE POLYPECTOMY TO CONVENTIONAL COLD SNARE POLYPECTOMY FOR NON-PEDUNCULATED COLON POLYPS OF SIZE 5-10 MM (COLDWATER STUDY)

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Poster

Colorectal

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A randomized controlled trial of 397 polyps found underwater cold snare polypectomy superior to conventional cold snare polypectomy for 5-10mm non-pedunculated colon polyps in achieving muscularis mucosa resection and lower incomplete resection rates.

KEY POINTS

- Underwater cold snare polypectomy achieved higher muscularis mucosa resection rate than conventional cold snare polypectomy (81.72% vs 72.33%, $p=0.003$) and lower incomplete resection rate (3.5% vs 8.5%, $p=0.05$).
- En bloc resection rate was higher with underwater technique (98% vs 93.5%, $p=0.04$), though R0 resection rates did not differ significantly between groups (93.9% vs 90%, $p=0.29$).
- The only complication in either group was non-severe intraprocedural bleeding, successfully managed during endoscopy (0.5% underwater vs 2% conventional, $p=0.37$).
- Underwater polypectomy efficacy did not vary by endoscopist expertise level, whereas conventional technique showed expert advantage (R0 rate 93% vs 84%, $p=0.05$).
- This material is relevant for endoscopists performing polypectomy on small colon polyps and those interested in techniques that may reduce operator-dependence.

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