

THE IMPACT OF EUSFNB USING PROCORE NEEDLES FOR MICROSATELLITE INSTABILITY ASSESSMENT IN UNRESECTABLE PANCREATIC ADENOCARCINOMA

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Poster

Pancreas

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A single-centre study of 31 patients demonstrated that endoscopic ultrasound-guided fine needle biopsy using Procore needles achieved 80% tissue adequacy for microsatellite instability and mismatch repair testing in pancreatic adenocarcinoma, with 20G needles outperforming 22G needles.

KEY POINTS

- The overall tissue adequacy rate for MSI/dMMR assessment was 80% (25/31 patients), with 100% histological yield from EUSFNB using Procore needles.
- The 20G Procore needle with forward side-bevel achieved higher tissue adequacy for MSI/dMMR testing than the 22G needle with reverse side-bevel (88.8% vs 69.2%, p-value = 0.207).
- Two of 23 patients with successful MSI/dMMR testing (8.7%) had MSI-high status; one received pembrolizumab and the other received best supportive care.
- The study affirmed the feasibility of routine MSI testing from EUSFNB specimens but noted that larger adequately powered studies are needed to confirm the comparative performance of needle types.
- This study is most relevant to gastroenterologists and endosonographers performing tissue acquisition in pancreatic adenocarcinoma for molecular testing.

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