

THE FEASIBILITY AND SAFETY OF THE MOTORIZED SPIRAL ENTEROSCOPE FOR ENDOSCOPIC BALLOON DILATATION OF STRICTURES IN CROHN'S DISEASE: CASE SERIES

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Poster

Oesophagus

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This retrospective case series of 10 Crohn's disease patients undergoing 13 motorized spiral enteroscopy procedures with balloon dilatation of small bowel strictures demonstrates technical feasibility and safety with no adverse events beyond mild anticipated discomfort.

KEY POINTS

- Technical success was achieved in 12 of 13 procedures using propofol sedation without intubation, with one case unsuccessful due to stricture length and angulation.
- Between one and five strictures per procedure were treated, with maximal dilatations of 15 to 18 mm and procedure durations ranging from 30 to 80 minutes.
- No adverse events occurred beyond anticipated mild abdominal discomfort or sore throat in three patients; two retained video capsules were successfully retrieved.
- The distal 16 cm of the endoscope not being covered by the spiral overtube enabled safe passage beyond recently dilated strictures, allowing multiple stricture treatment in single sessions when strictures were close together.
- Fluorescence imaging was used in six procedures and may be helpful in cases of severe stenosis, multiple strictures, or sharp angulations.

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