

# THE DIAGNOSTIC PERFORMANCE OF MAGNIFYING ENDOSCOPY WITH THIRD-GENERATION NARROW-BAND IMAGING FOR EARLY GASTRIC CANCER; POST HOC ANALYSIS OF THE RANDOMIZED TRIAL (3G DETECTION TRIAL)

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Poster

Oesophagus

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**Post hoc analysis of a phase II trial found that magnifying endoscopy with third-generation narrow-band imaging achieved acceptable diagnostic performance for early gastric cancer, with overall accuracy of 83.8% and significantly better performance in high-confidence diagnoses.**

## KEY POINTS

- Overall diagnostic performance showed sensitivity of 70.5%, specificity of 88.6%, accuracy of 83.8%, positive predictive value of 69.6%, and negative predictive value of 89.2%
- High-confidence diagnoses demonstrated significantly superior performance compared to low-confidence diagnoses, with accuracy of 92.4% versus 74.6% and specificity of 97.7% versus 79.0% (both  $p < 0.001$ )
- Analysis included 228 suspected gastric neoplasm lesions in 187 patients from a randomized trial, with median lesion size of 5.0 mm and 81.1% of lesions being flat or depressed type
- Performance varied by lesion morphology, with elevated lesions showing sensitivity of 84.6% and specificity of 96.7% compared to flat or depressed lesions at 66.7% and 86.9% respectively
- This study provides evidence for the diagnostic capability of third-generation narrow-band imaging technology using the EVIS X1 system and MESDA-G diagnostic algorithm

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