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Summary

EFFICACY OF ENDOSCOPIC SURVEILLANCE WITH LUGOL STAINING FOR PHARYNGEAL MUCOSA DURING ENDOSCOPIC RESECTION FOR PHARYNGEAL CARCINOMA – A MULTICENTER PROSPECTIVE STUDY

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Endoscopic surveillance with lugol staining during endoscopic resection for superficial pharyngeal squamous cell carcinoma detected previously unidentified lesions in 12.8% of patients.

KEY POINTS

- In a study of 78 patients undergoing endoscopic resection for superficial pharyngeal squamous cell carcinoma between January 2021 and June 2022, endoscopic surveillance during treatment identified new lesions of squamous cell carcinoma or high-grade dysplasia in 10 patients (12.8%, 95% CI: 6.9 – 22.2%).
- Among 13 newly detected lesions, 8 were identified by narrow band imaging observation, while 5 were undetectable by narrow band imaging but detectable by lugol staining.
- All 13 newly detected lesions showed pink color sign on lugol staining.
- The authors conclude that endoscopic surveillance with lugol staining during endoscopic resection for superficial pharyngeal squamous cell carcinoma is feasible and useful for detecting pharyngeal sublesions.
- This approach may be relevant for clinicians performing endoscopic resection of superficial pharyngeal squamous cell carcinoma under general anesthesia.

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