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Summary

COMPUTER-AIDED DIAGNOSTIC SYSTEM USING NON-MAGNIFIED WHITE LIGHT IMAGING IN EARLY-STAGE COLORECTAL CANCER: COMPARISON WITH PROSPECTIVE STUDIES USING MAGNIFIED NBI ENDOSCOPY AND MAGNIFIED CHROMOENDOSCOPY

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Colorectal

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A computer-aided diagnostic system using non-magnified white light imaging showed lower overall accuracy than expert magnified endoscopy for diagnosing deep invasion in early-stage colorectal cancer, but performed comparably for depressed and polypoid lesion subtypes.

KEY POINTS

- The CAD system achieved 82.1% overall accuracy for diagnosing T1b colorectal cancer (invasion depth ≥1000 μm), significantly lower than M-NBI (90.2%) and MCE (90.7%) performed by experts in real time
- CAD demonstrated 57.1% sensitivity, 85.8% specificity, 37.5% positive predictive value, and 93.1% negative predictive value for T1b diagnosis
- For depressed lesions, CAD accuracy (87.5%) matched M-NBI (87.5%) and exceeded MCE (81.3%); for polypoid lesions, CAD accuracy (76.1%) was slightly lower than M-NBI (83.1%) and MCE (84.5%)
- The study analyzed 1428 images from 162 early-stage CRC cases, including 125 Tis, 16 T1a, and 21 T1b cancers from a multicenter prospective registry
- This work may interest endoscopists seeking non-magnified imaging alternatives for assessing invasion depth in early colorectal cancer

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