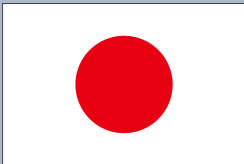


Minimally Invasive and Novel Therapeutics (M.I.N.T.) in Foregut Disease
September 29th -October 1st 2022

Endotherapy for Duodenal Adenomas – EMR, ESD, Hybrid Concepts?

Seiichiro Abe



Endoscopy Division, National Cancer Center Hospital



No COI



Foundation for
Research & Education
in Endoscopy

Proud to partner in this International Collaborative Session !

JOIN US !

Friday September 30, 2022

Video & Discussion: Anterior vs Posterior POEM – Amol Bapaye

Saturday, October 1st, 2022

0810-0910hrs EST (GMT-5); 1740-1840hrs IST (GMT+5.30)

International Session Moderators

**Pankaj Desai, India
Harshal Gadhikar, India
Rapat Pittanyanon, Thailand**

**Endotherapy for Duodenal adenomas –
EMR, ESD, Hybrid concepts?**

Seiichiro Abe, Japan

The 'Difficult' POEM - Challenges, Tips, Tricks

Mohan Ramchandani, India

POEM + Endoscopic Fundoplication (POEM+F)

Amol Bapaye, India

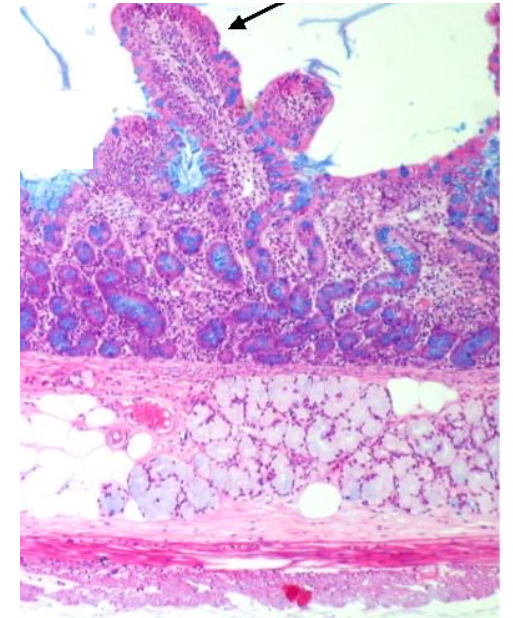
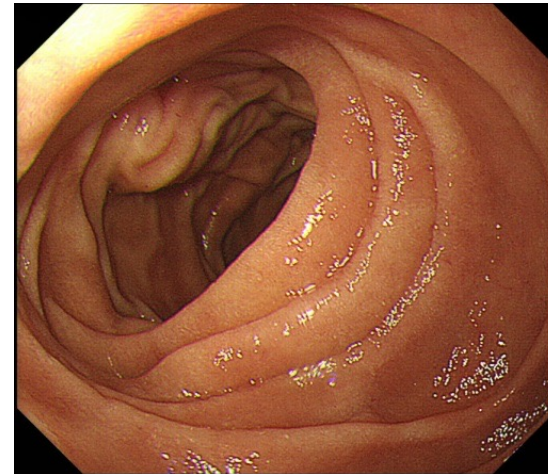
Endoscopic Full-Thickness Resection for Gastric SETs

Hon Chi Yip, Hong Kong

Endoscopic resection (ER) of duodenal tumor

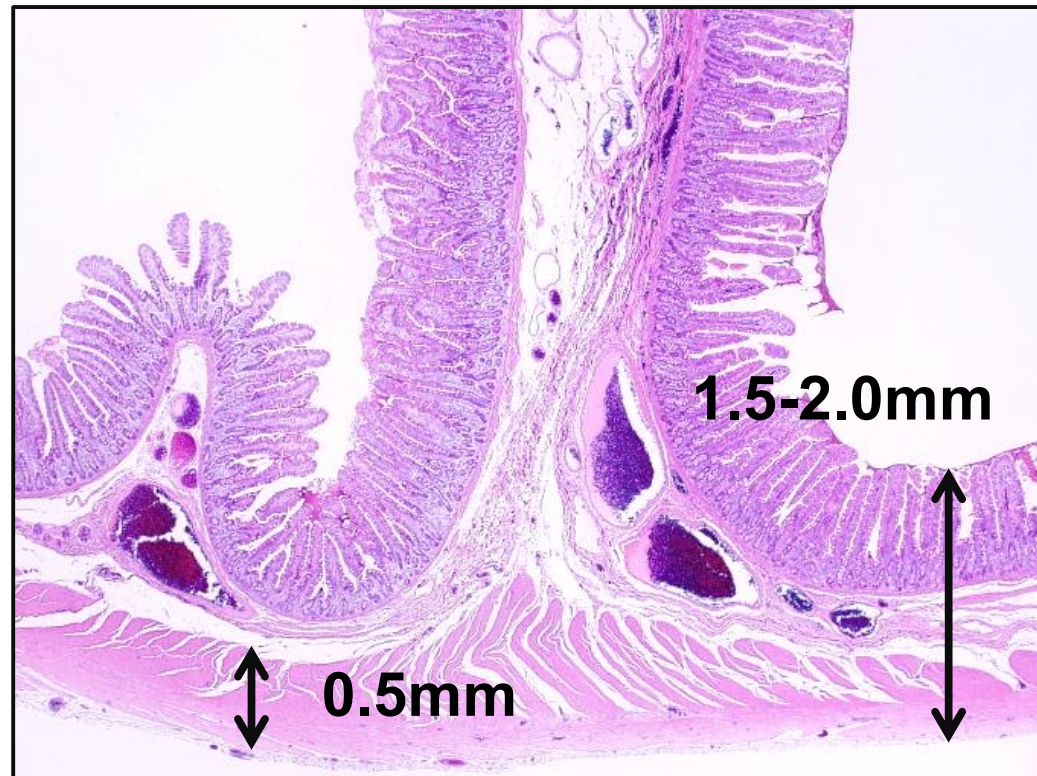
Technically the most challenging because of...

- **Narrow lumen**
- **Poor scope maneuverability**
- **Brunner glands in submucosal layer**



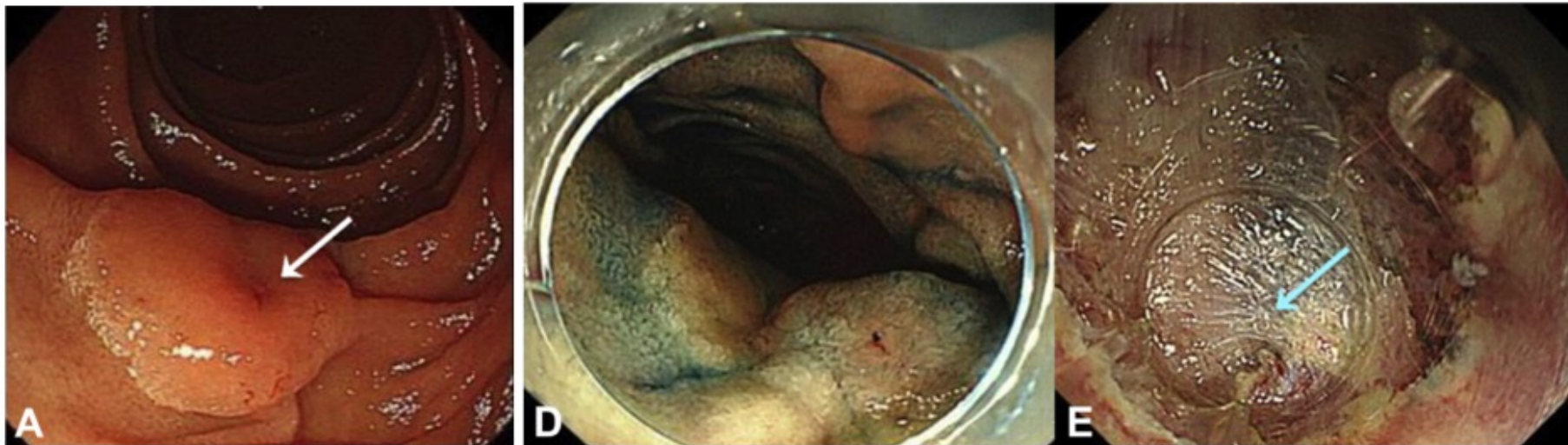
Endoscopic resection (ER) of duodenal tumor

➤ Thin muscle layer



Is Preoperative Biopsy Needed?

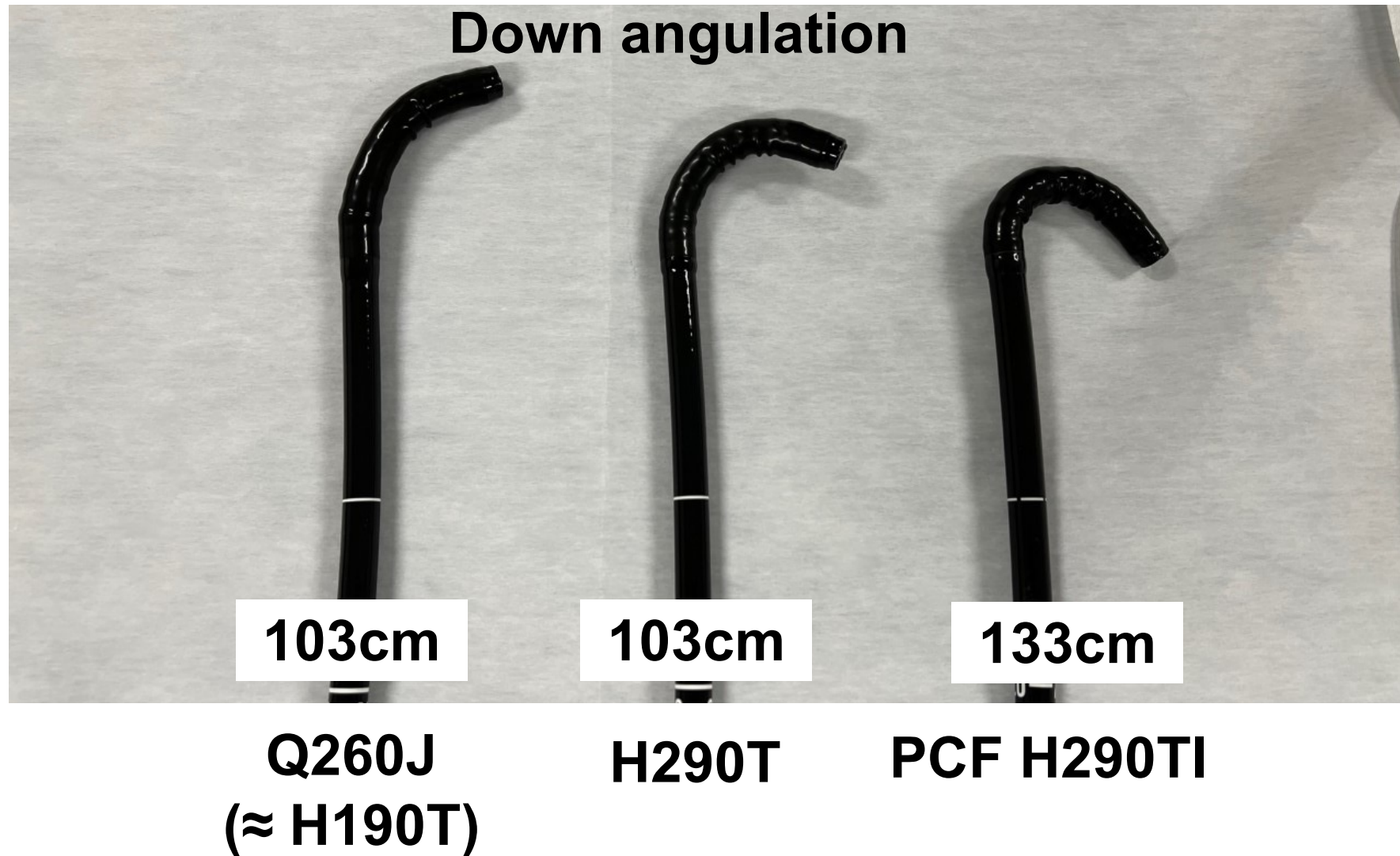
Sensitivity 37.5%, Specificity 83.1%, Accuracy 71.6%



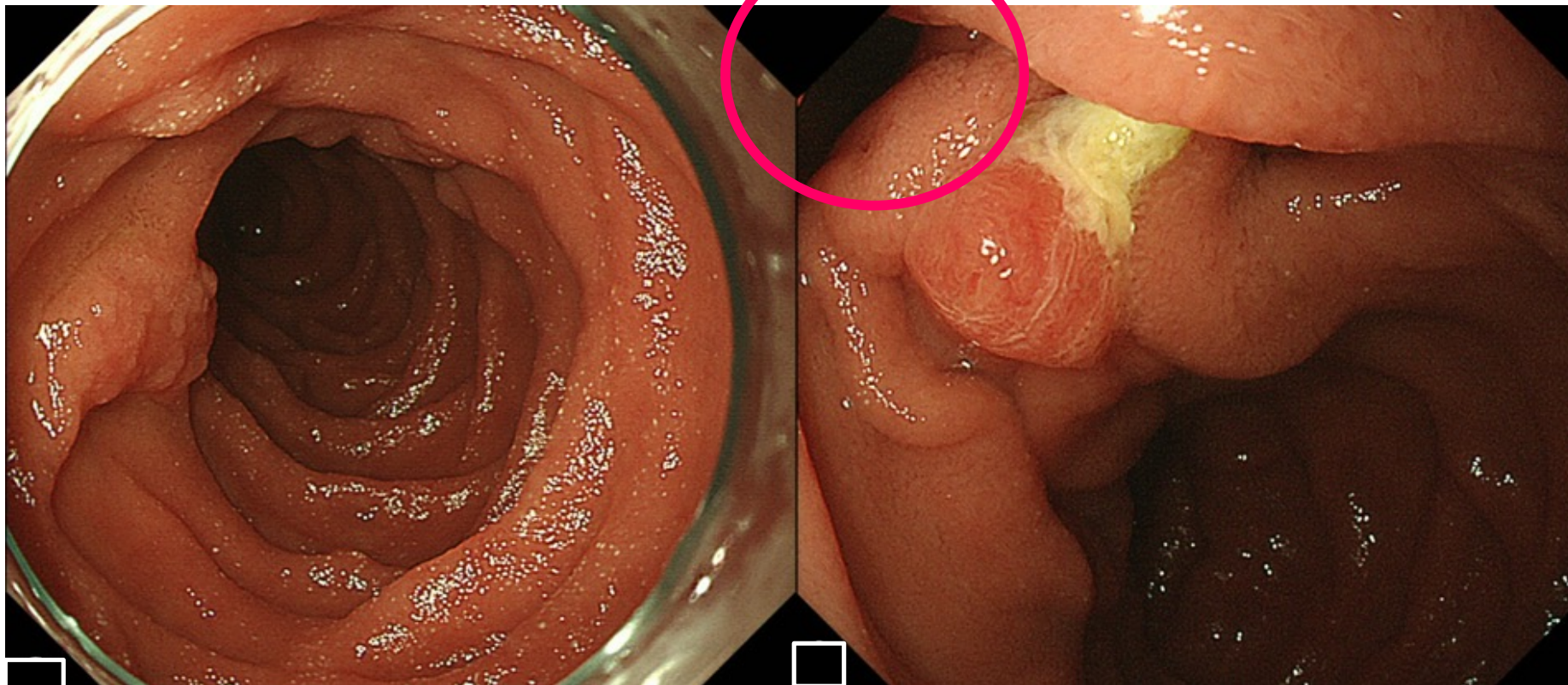
Following submucosal fibrosis

Kinoshita S, et al: Gastrointest Endosc, 2017.

Endoscope selection for successful EMR



How I do it: Conventional EMR



2nd part, 12mm, 0-IIa

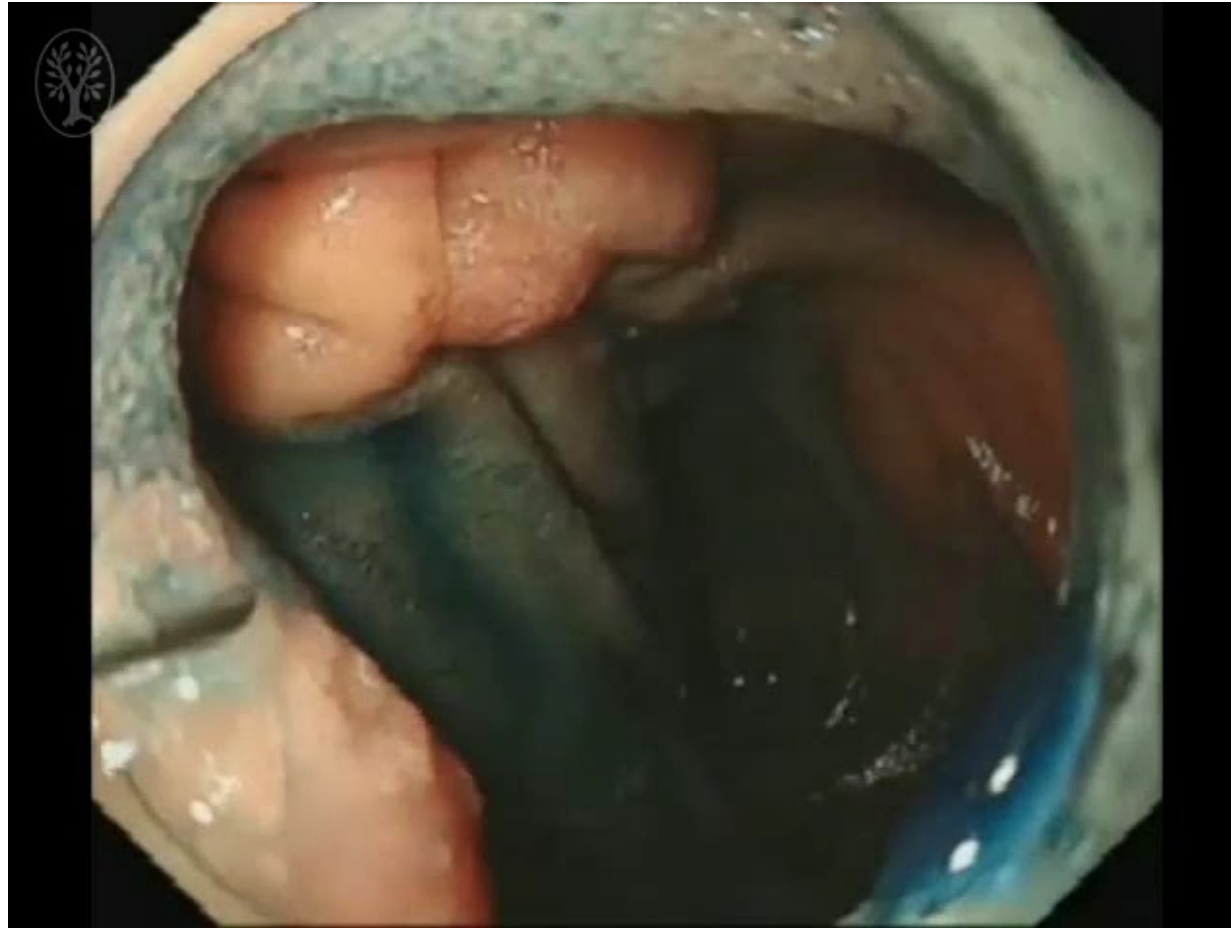
Abe S, et al. Endoscopy 2015

Speaker: Abe S



Endoscopy Division, National Cancer Center Hospital

How I do it: Conventional EMR



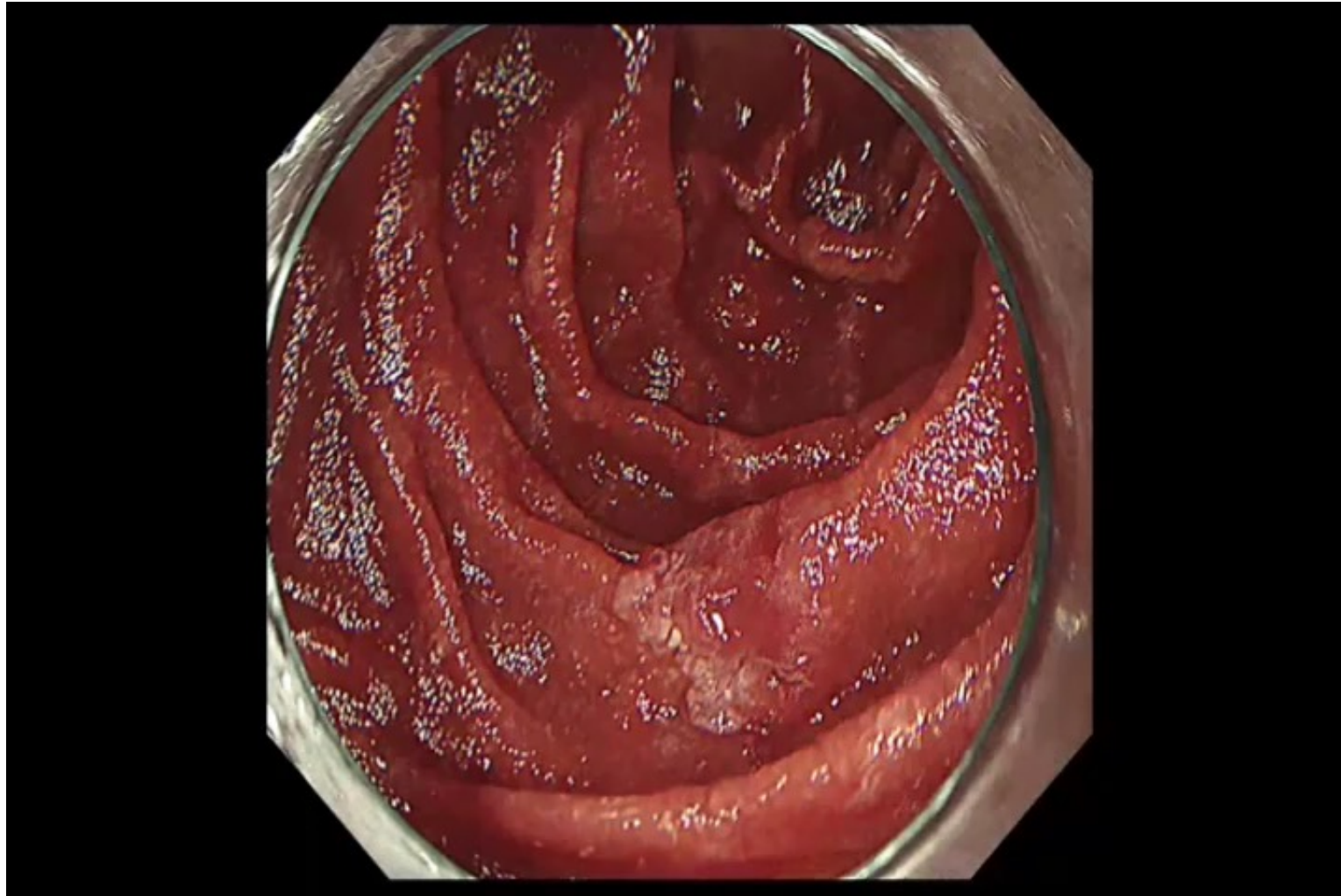
Abe S, et al. Endoscopy 2015

Speaker: Abe S



Endoscopy Division, National Cancer Center Hospital

How I do it: Underwater EMR (UEMR)



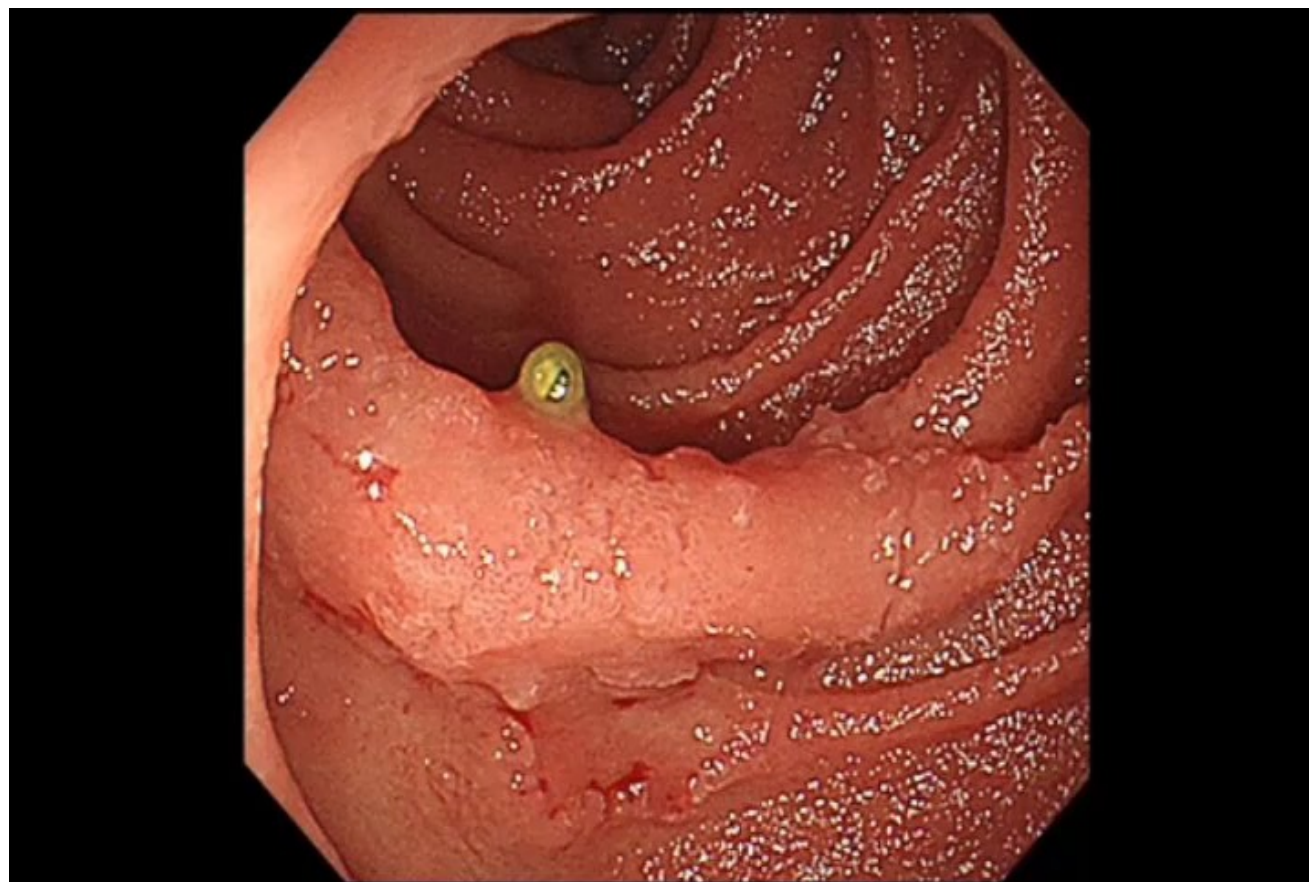
Edited by Dr. Miyabe M

Speaker: Abe S



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Laparoscopic and Endoscopic Cooperative Surgery (D-LECS)



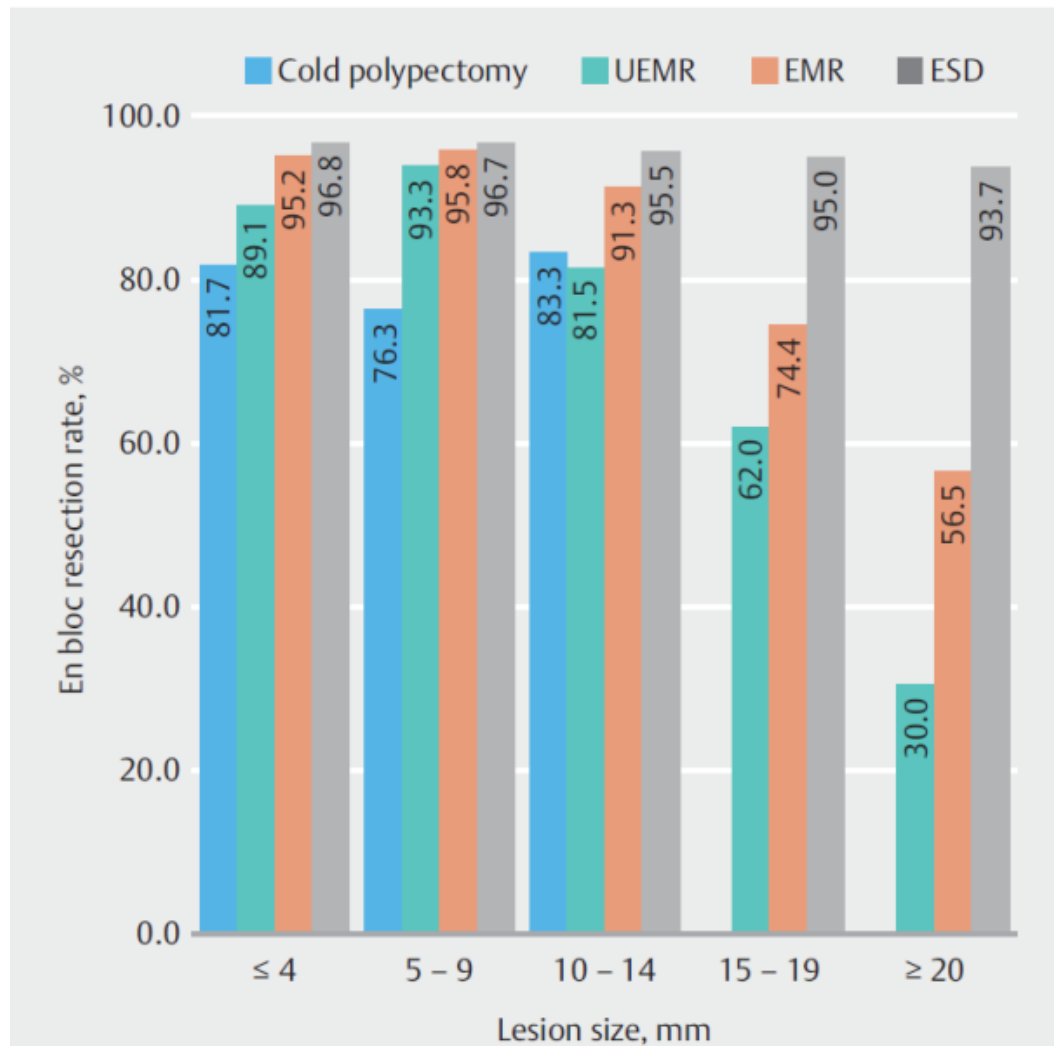
Speaker: Abe S



Endoscopy Division, National Cancer Center Hospital

Edited by Dr. Kusaka H

Outcomes of endoscopic resection for superficial duodenal tumors: 10 years' experience in 18 Japanese high volume centers



Local recurrence rate

Overall

ESD 0.4%
EMR 2.8% (P<0.001)

Lesions >30mm

ESD 1.6%
EMR 22.6% (P<0.001)

Kato M et al. Endoscopy 2021

Outcomes of endoscopic resection for superficial duodenal tumors: 10 years' experience in 18 Japanese high volume centers

	Polypectomy, EMR	ESD
Intraoperative perforation	0.6%	9.3%
Delayed bleeding	2.4%	6.8%
Delayed perforation	0.1%	2.3%
Surgery due to adverse events	0.04%	2.5%

Kato M et al. Endoscopy 2021

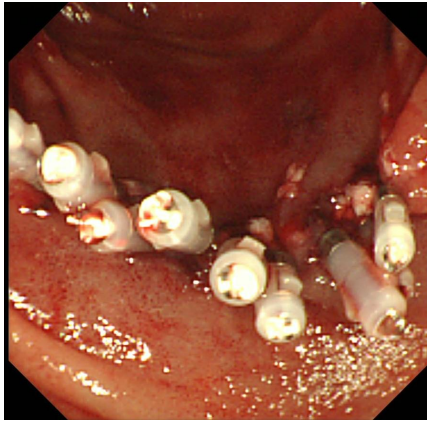
Speaker: Abe S



Endoscopy Division, National Cancer Center Hospital

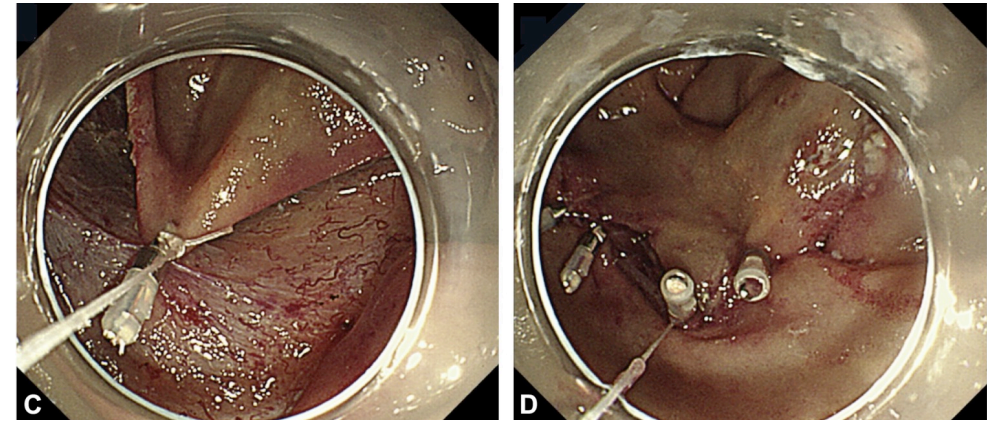
Preventive Closure or Tissue shielding

Endoclips



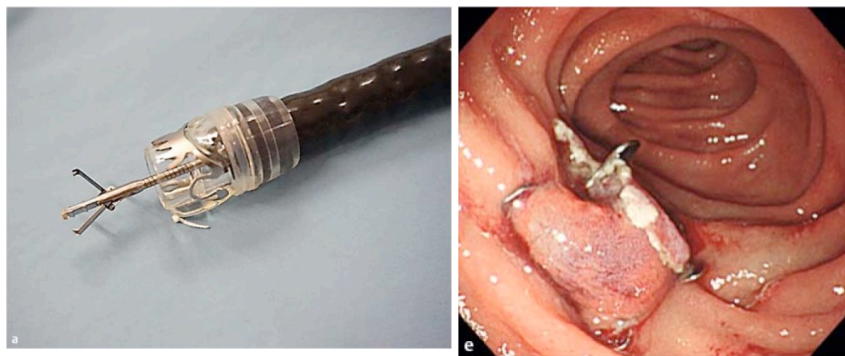
Tomizawa M, Ginsberg G. GIE 2018

A string clip suturing



Kato K. GIE 2019

OTSC



Tashima T, Endoscopy 2018

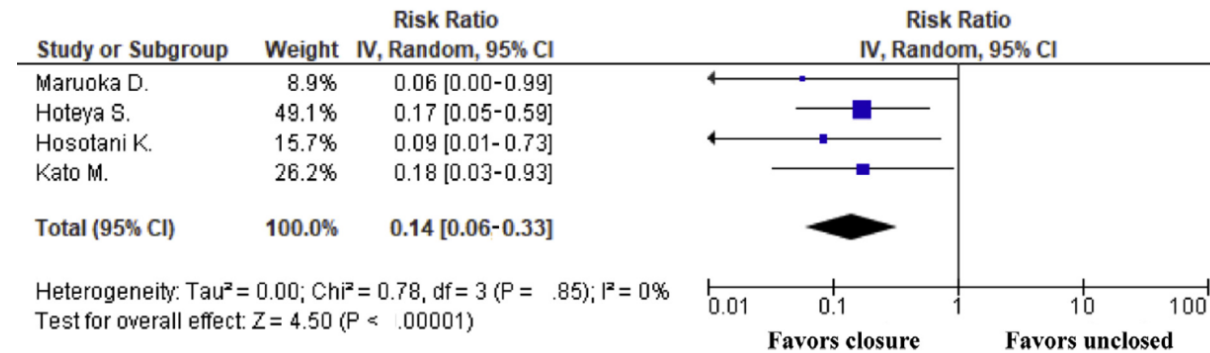
PGA sheet and fibrin glue



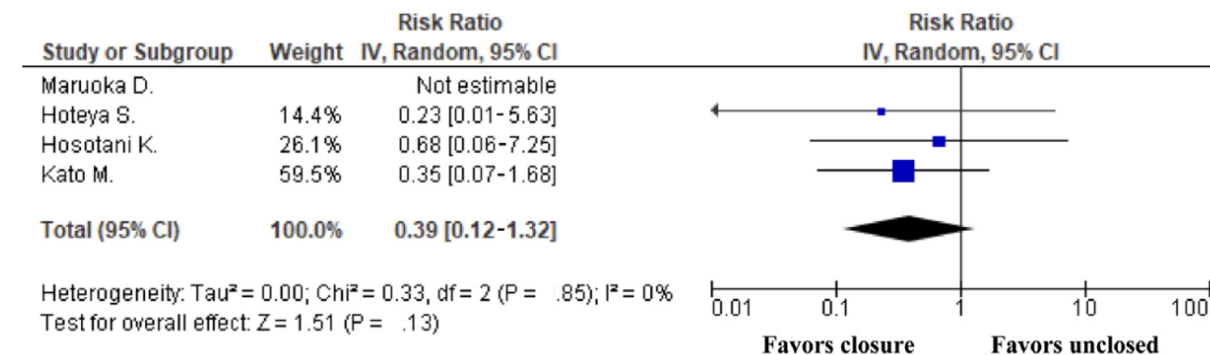
Takimoto K. DEN 2014

Endoscopic Preventive Procedure

- Delayed bleeding: Risk Ratio 0.14



- Delayed bleeding: Risk Ratio 0.39



Tsutsumi K, Kato M et al GIE 2021

Duodenal EMR/ESD

- Scope selection is essential
- ESD or D-LECS should be performed by limited experts
- Endoscopic preventive procedure is highly recommended

