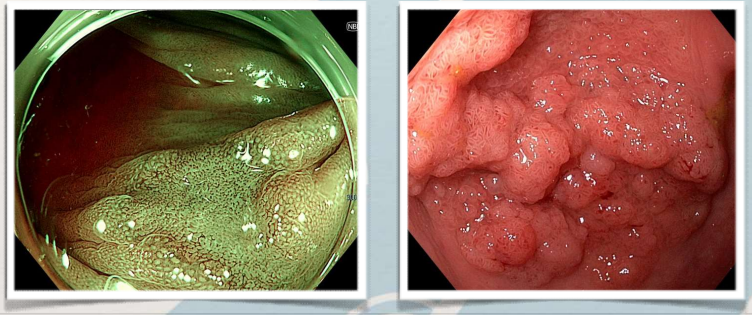
Endoscopia di Qualità

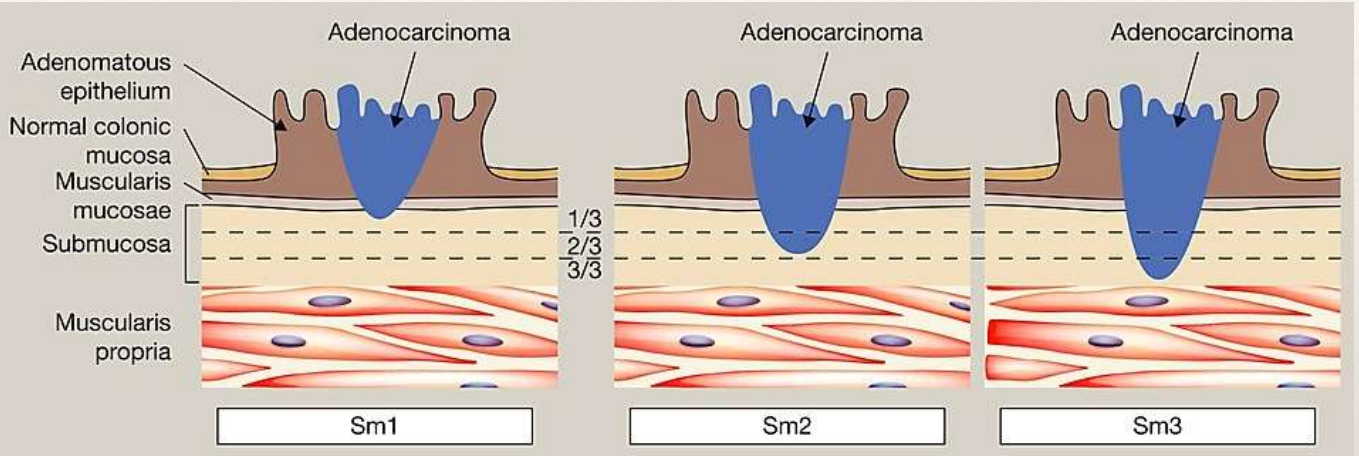
Diagnosi e Stadiazione Ottica
Endoscopia Resettiva

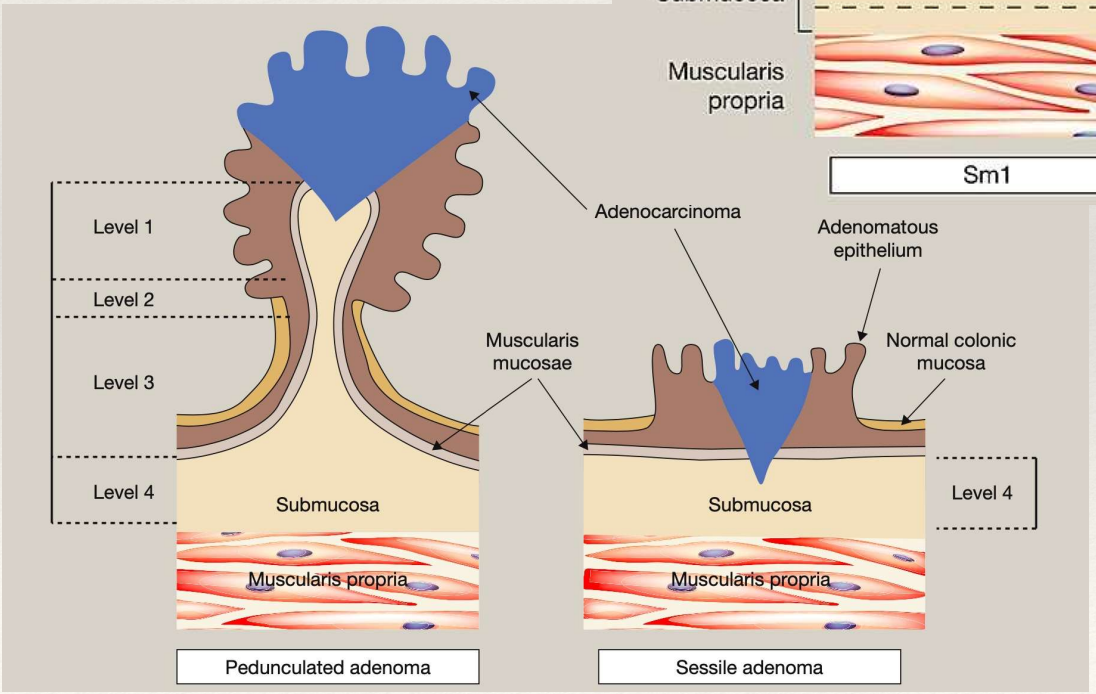


Dott. Maurizio Spandre
S.C. Gastroenterologia ASL Città di Torino

Endoscopia Resettiva - Indicazioni

LESIONI A BASSO RISCHIO MTS LN





Lesioni superficiali

(M - Sm1)

G1-G2, L0, V0,

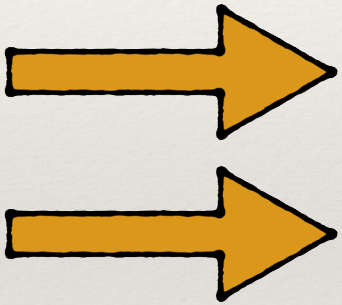
Budding basso grado

Endoscopia Resettiva - Indicazioni

DIAGNOSI/STADIAZIONE OTTICA

WLI - Morfologia

HD - NF - DF - CE



Classificazione di Parigi

NICE, JNET, Kudo, JES, BING

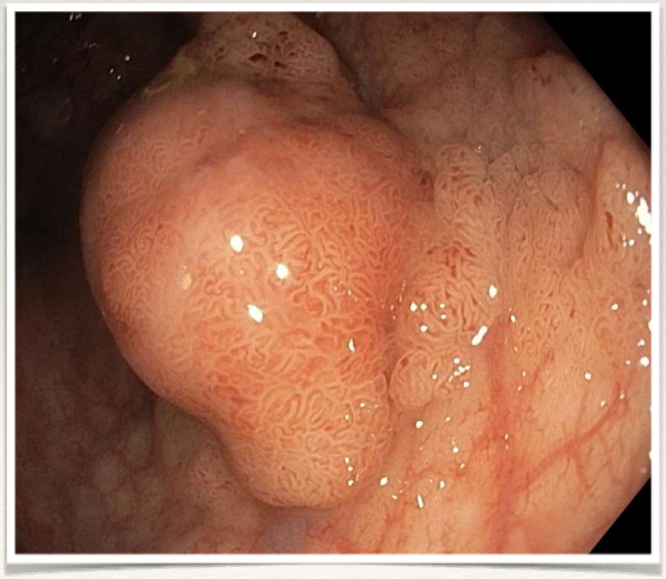
RISCHIO DI INFILTRAZIONE PROFONDA?

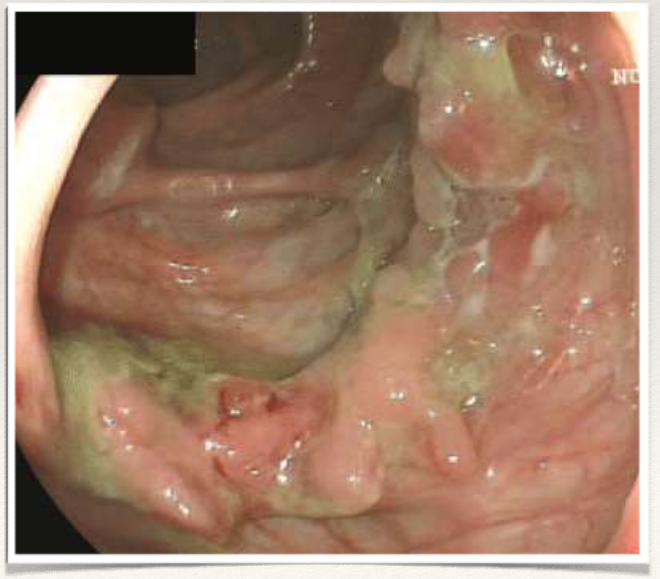
Lesioni Coliche - Diagnosi e Stadiazione

BIOPSIA

Superficiale (mucosa) - Parcellare

Diagnostca - NON STADIATIVA





Lesioni Coliche - Diagnosi e Stadiazione

TC - MRI - EUS

Accuratezza T1-T2 molto bassa

Rischio di Overstaging

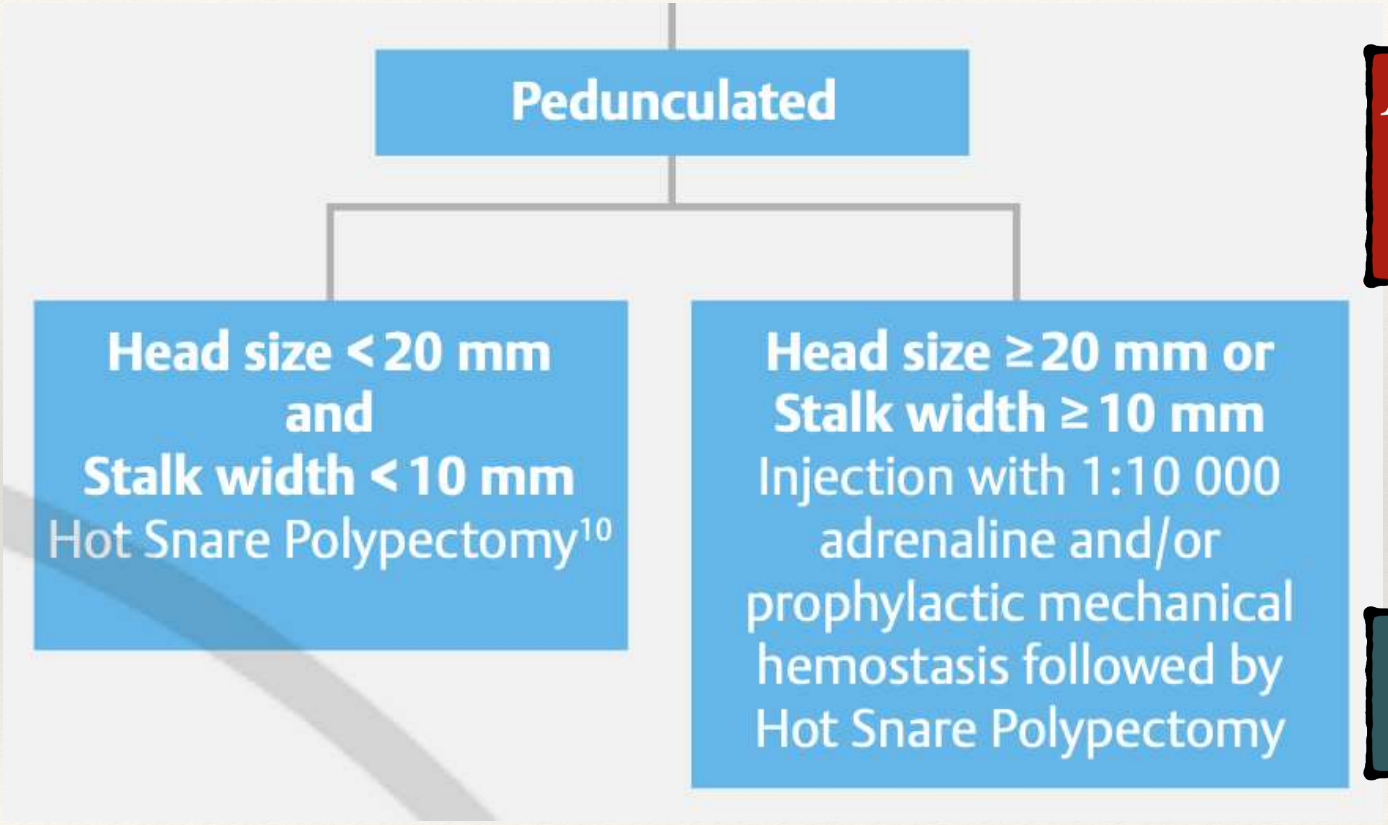
Indicate in lesioni sospette per invasione profonda

TC - MRI - EUS

DIAGNOSI OTTICA

Pimentel-Nunes P, Libânio D, Bastiaansen BAJ, Bhandari P, Bisschops R, Bourke MJ, Esposito G, Lemmers A, Maselli R, Messmann H, Pech O, Pioche M, Vieth M, Weusten BLAM, van Hooft JE, Deprez PH, Dinis-Ribeiro M. Endoscopic submucosal dissection for superficial gastrointestinal lesions: European Society of Gastrointestinal Endoscopy (ESGE) Guideline - Update 2022. Endoscopy. 2022 Jun;54(6):591-622. doi: 10.1055/a-1811-7025. Epub 2022 May 6. PMID: 35523224.

Lesioni Coliche - Indicazioni Resettive

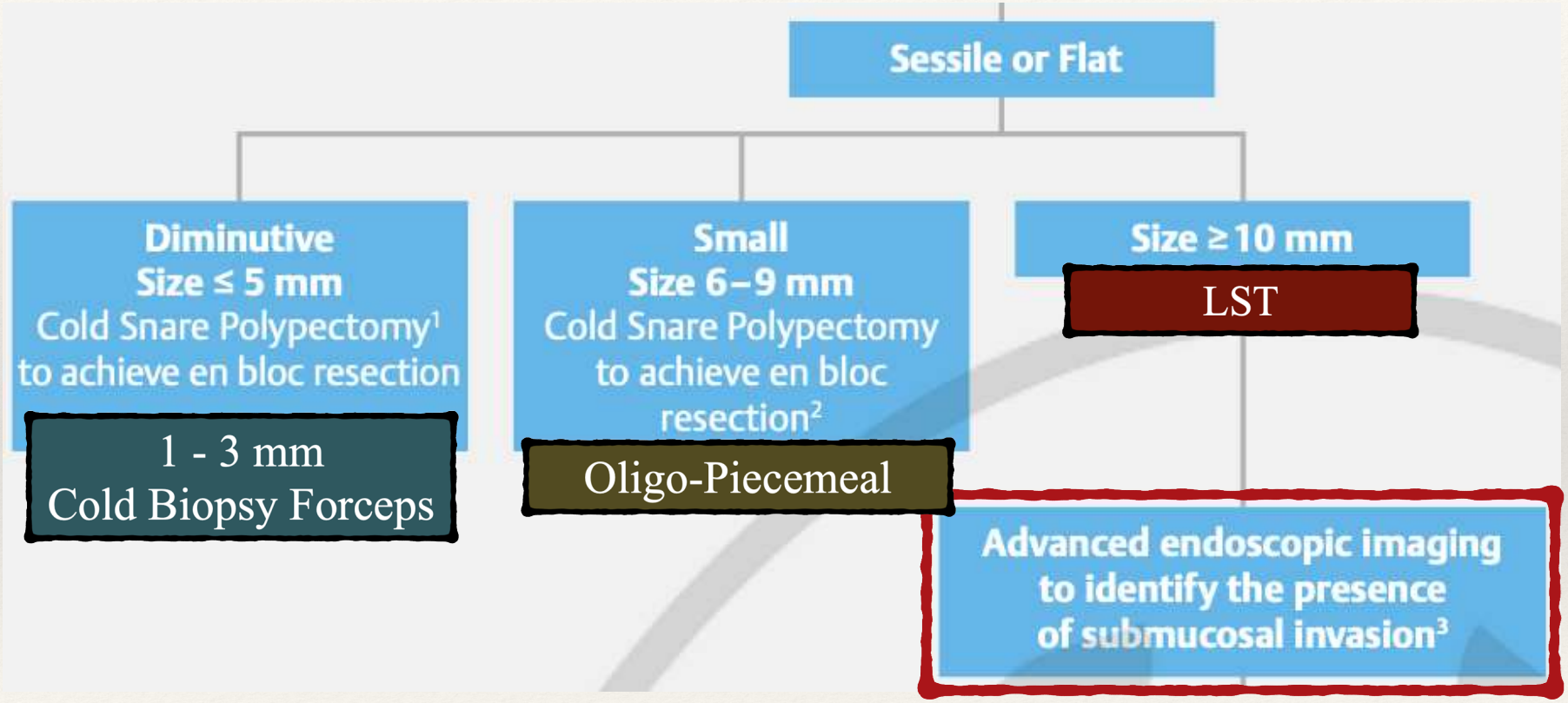


Alto rischio di sanguinamento (anticoagulanti, coagulopatìe, ecc.)

Considerare emostasi meccanica profilattica

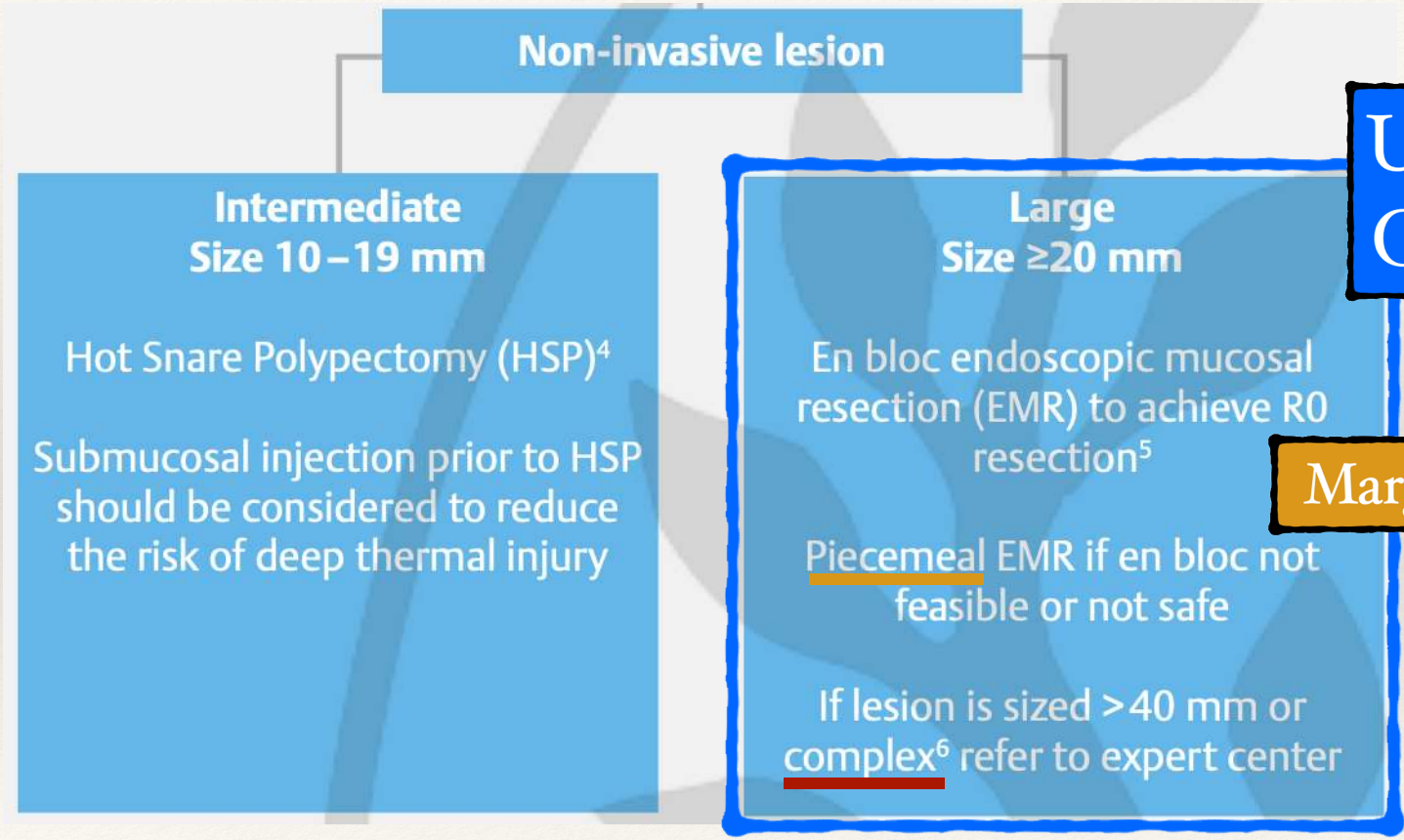
Ferlitsch M, Moss A, Hassan C, Bhandari P, Dumonceau JM, Paspatis G, Jover R, Langner C, Bronzwaer M, Nalankilli K, Fockens P, Hazzan R, Gralnek IM, Gschwantler M, Waldmann E, Jeschek P, Penz D, Heresbach D, Moons L, Lemmers A, Paraskeva K, Pohl J, Ponchon T, Regula J, Repici A, Rutter MD, Burgess NG, Bourke MJ. Colorectal polypectomy and endoscopic mucosal resection (EMR): European Society of Gastrointestinal Endoscopy (ESGE) Clinical Guideline. Endoscopy. 2017 Mar;49(3):270-297. doi: 10.1055/s-0043-102569. Epub 2017 Feb 17. PMID: 28212588.

Lesioni Coliche - Indicazioni Resettive



Ferlitsch M, Moss A, Hassan C, Bhandari P, Dumonceau JM, Paspatis G, Jover R, Langner C, Bronzwaer M, Nalankilli K, Fockens P, Hazzan R, Gralnek IM, Gschwantler M, Waldmann E, Jeschek P, Penz D, Heresbach D, Moons L, Lemmers A, Paraskeva K, Pohl J, Ponchon T, Regula J, Repici A, Rutter MD, Burgess NG, Bourke MJ. Colorectal polypectomy and endoscopic mucosal resection (EMR): European Society of Gastrointestinal Endoscopy (ESGE) Clinical Guideline. Endoscopy. 2017 Mar;49(3):270-297. doi: 10.1055/s-0043-102569. Epub 2017 Feb 17. PMID: 28212588.

Lesioni Coliche - Indicazioni Resettive



U-pEMR Optional

Margins Thermal Ablation

- Sede e accesso
- Non naive
- Non lifting

Ferlitsch M, Moss A, Hassan C, Bhandari P, Dumonceau JM, Paspatis G, Jover R, Langner C, Bronzwaer M, Nalankilli K, Fockens P, Hazzan R, Gralnek IM, Gschwantler M, Waldmann E, Jeschek P, Penz D, Heresbach D, Moons L, Lemmers A, Paraskeva K, Pohl J, Ponchon T, Regula J, Repici A, Rutter MD, Burgess NG, Bourke MJ. Colorectal polypectomy and endoscopic mucosal resection (EMR): European Society of Gastrointestinal Endoscopy (ESGE) Clinical Guideline. Endoscopy. 2017 Mar;49(3):270-297. doi: 10.1055/s-0043-102569. Epub 2017 Feb 17. PMID: 28212588.

EMR en bloc | p-EMR

Bleeding
6-12 %

Perforation
1-2 %

Recurrence
(margin thermal ablation)
1.5-3 %

Indicazioni

EMR en bloc

- Lesioni
  ad alto rischio
- Asportabili en bloc
  con ansa

p-EMR

- Lesioni
  a basso rischio

U-EMR

Indicazioni, Outcomes e AE simili a EMR

- Effetto "floating"
- Non lifting Scarring
- Perforazione ↓

Lesioni Coliche - Indicazioni Resettive

Suspected superficial submucosal invasion[8]

Extensive photodocumentation

Refer to expert center for consideration of en bloc resection by ESD

Kudo Vi - JNET 2b

Suspected deep submucosal invasion[9]

Colonic tattoo 3 cm distal to the lesion

EFTR EID

Extensive documentation

Referral for consideration of surgical resection[10]

Kudo Vn - JNET 3

Rectal lesion ≥20 mm

Flat 0-IIa No features of SMIC on advanced imaging

EMR to achieve R0 resection where feasible[5]

Piecemeal EMR for lesions ≥25–30 mm

Complete thermal ablation of the resection margins

Any 0-Is component ≥10 mm Features of superficial SMIC

Extensive photo-documentation

Refer to expert center for consideration of en bloc resection by ESD

Ferlitsch M, Hassan C, Bisschops R, Bhandari P, Dinis-Ribeiro M, Risio M, Paspatis GA, Moss A, Libânio D, Lorenzo-Zúñiga V, Voiosu AM, Rutter MD, Pellisé M, Moons LMG, Probst A, Awadie H, Amato A, Takeuchi Y, Repici A, Rahmi G, Koecklin HU, Albéniz E, Rockenbauer LM, Waldmann E, Messmann H, Triantafyllou K, Jover R, Gralnek IM, Dekker E, Bourke MJ. Colorectal polypectomy and endoscopic mucosal resection: European Society of Gastrointestinal Endoscopy (ESGE) Guideline - Update 2024. Endoscopy. 2024 Jul;56(7):516-545. doi: 10.1055/a-2304-3219. Epub 2024 Apr 26. PMID: 38670139.

ESD - Endoscopic Submucosal Dissection

Chirurgia per AE 1.1%

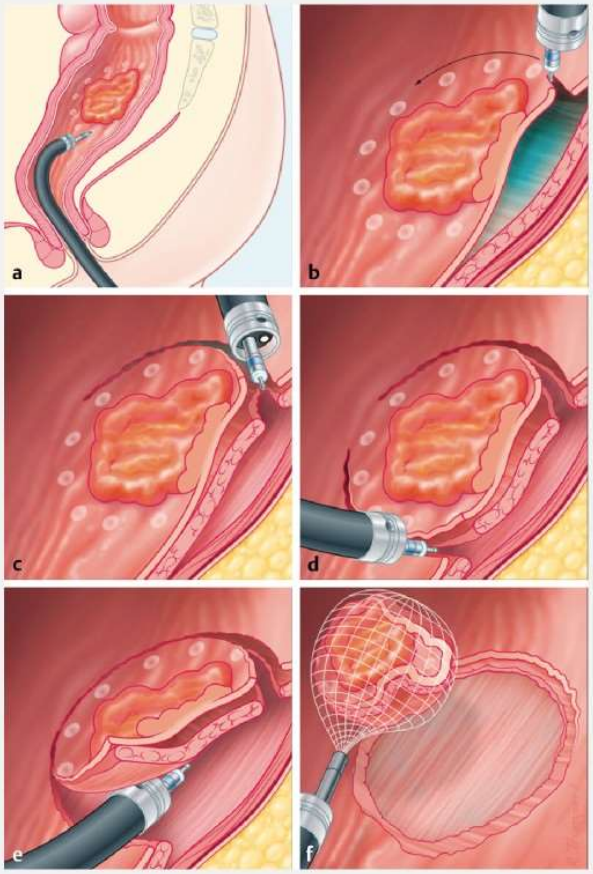
Sanguinamento 2.7%

Perforazione 5.2%

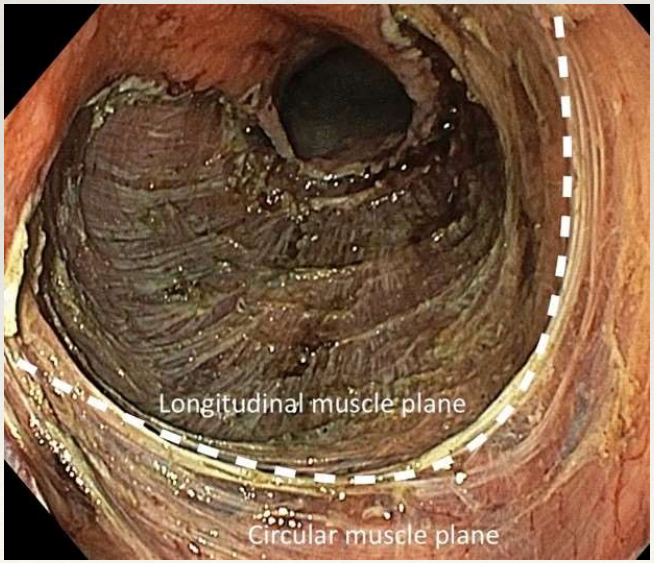
- En-bloc: 91%
- R0: 83%
- Recidiva: 2%

Pimentel-Nunes P, Libânio D, Bastiaansen BAJ, Bhandari P, Bisschops R, Bourke MJ, Esposito G, Lemmers A, Maselli R, Messmann H, Pech O, Pioche M, Vieth M, Weusten BLAM, van Hooft JE, Deprez PH, Dinis-Ribeiro M. Endoscopic submucosal dissection for superficial gastrointestinal lesions: European Society of Gastrointestinal Endoscopy (ESGE) Guideline - Update 2022. Endoscopy. 2022 Jun;54(6):591-622. doi: 10.1055/a-1811-7025. Epub 2022 May 6. PMID: 35523224.

EID - Endoscopic Intermuscular Dissection



- Non-lifting - Scarring
- >Sm1 (w/o other high risk stigmata)
- Non Exposed



TS
96%

R0
81%

AE 12%
No need for surgery

Moons LMG, Bastiaansen BAJ, Richir MC, Hazen WL, Tuynman J, Elias SG, Schrauwen RWM, Vleggaar FP, Dekker E, Bos P, Fariña Sarasqueta A, Lacle M, Hompes R, Didden P. Endoscopic intermuscular dissection for deep submucosal invasive cancer in the rectum: a new endoscopic approach. Endoscopy. 2022 Oct;54(10):993-998. doi: 10.1055/a-1748-8573. Epub 2022 Jan 24. PMID: 35073588.

EFTR

R0
69 %

AE
0 %

Umpublished Data

Indicazioni

- Non-lifting Scarring
- >Sm1
  no LND
  unfit4surgery

Endoscopia Resettiva - Quale Metodica?