Underwater endoscopic mucosal resection: the best solution for treating local recurrence of duodenal adenoma

The prevalence of duodenal adenomas ranges from 0.10% to 0.82% [1, 2]. Studies show that underwater endoscopic mucosal resection (EMR) is an efficient technique for the treatment of these kinds of lesions, with 87.5% to 100% complete endoscopic resection [3]. However, its use for the treatment of local recurrence after previous duodenal adenoma resection is yet to be well established. We report the case of an 80-year-old woman who presented with a recurrent non-ampullary duodenal adenoma, initially resected by piecemeal EMR (low grade dysplasia) and hybrid EMR for a first recurrence (at 6 months). At follow-up endoscopy (2 years later), a new local recurrence was observed and underwater EMR was performed (▶Video 1). After filling the duodenal lumen with water, the 4-mm lesion floated up into the snare and was easily grasped and completely cut. The resection was macroscopically complete and there were no complications observed.

To our knowledge, the role of underwater EMR is yet to be clearly established in the context of recurrent non-ampullary duodenal adenoma. Overall, this technique seems promising for increasing the rate of complete resections, potentially leading to lower recurrence rates. Nevertheless, strong evidence supporting its use in the context of recurrent duodenal adenomas is still lacking and further studies are necessary to fully confirm our hypothesis.

The authors

Mariana Figueiredo1, Clara Yzet1, Pierre Lafeuille1, Nicolas Benech1, Jérôme Rivory1, Mathieu Pioche1,2
1 Gastroenterology and Endoscopy Unit, Pavillon L, Edouard Herriot Hospital, Lyon, France
2 Inserm U1032, Labtau, Lyon, France

Corresponding author

Mariana Figueiredo, MD
Service hépato-gastroentérologie, Hopital Edouard Herriot, 5 place d’Arsonval, 69003 Lyon, France
mariana.figueiredo.pro@gmail.com

References


视频 1 水下内镜黏膜切除：治疗局部复发性十二指肠腺瘤的最佳解决方案。

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Competing interests

The authors declare that they have no conflict of interest.