

Endotherapy for high-grade dysplasia and early cancer in Barrett's esophagus

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EMR (2)

- ✓ HRE
- ✓ Submucosal injection
- ✓ EUS not necessary if complete removal (morphology of the lesion!)

Incidence of lymph node metastases

Infiltration	Lymp node (N)
IM esophagus	1 - 3%
Sm esophagus	12%
IM stomach	2.2%
Sm stomach	10 - 15%
IM colon	0%
Sm1 colon	3.2%

Lymph node metastases

	m1 - m2	m3 - Sm1	Sm2 - Sm3
SCC	< 2%	8 - 19%	40%

Yoshida M et al, 1995

Kodama M et al, Surgery 1998

Prevalence of synchronous invasive AC in BE patients with HGD (1)

	Visible lesions	No visible lesions
IEAC	12.7%	3%

Konda VJA et al., Clin Gastroenterol Hepatol 2008

Prevalence of synchronous invasive AC in BE patients with HGD (2)

- ✓ Medline-Pubmed: 23 articles
- ✓ 14 provided differentiation between IM and SM

1987-92	6
1993-98	7
1999-05	10

Konda VJA et al., Clin Gastroenterol Hepatol 2008

EMR in Barrett's esophagus

Change in the diagnosis: 44%
32% up-staging

Nijhawan et al., Gastrointest Endosc 2000

Comparison of EMR methods

Device	Size (mm)	Depth (mm)
Olympus	10	0.55
Duette	11	0.67

Prasad GA et al., AB Gastrointest Endosc 2006

Device	Size (mm)	Depth (mm)
Olympus	10.6	-
Duette	12.6	-

Fedi P et al., AB Gastrointest Endosc 2006

EMR Barrett's Esophagus

Past

- Visible nodular abnormalities
- Comorbidities/Advanced age
- Esophagectomy

EMR Barrett's Esophagus

Future

Barrett's esophagus of any length

Endotherapy: long-term follow-up (1)

Wiesbaden group

	HGD	Early AC	Total
# patients	61	288	349
Technique	#		
ER	279		
PDT	55		
ER + PDT	13		
APS	2		

Pech O et al., Gut 2008

Endotherapy: long-term follow-up (2)

Wiesbaden group

Complete resection	337 (96%)
ER failure	13 (4%) (<i>surgery</i>)
Metachronous lesions	74 (21%)
Death	None
5-year survival rate	84%

Pech O et al., Gut 2008

Circumferential EMR of BE with HGD

Author/year	# pts	BE length median	Follow-up mo	CR %	Recurrence	Complications
Pouw 2008	34	C1M4	23 (15-41)	91	3 HGD 5 BE	2 perforations 1 bleeding 19 strictures
Larghi 2007	26	2.5 (1-8)	2.5 (15-51)	87.5	2 buried BE 1 IMC	2 bleeding 3 stenosis
Lopes 2007	41	4.9 (1-15)	31.6 (0-83)	75.6	10	8 bleeding 2 perforations 1 stenosis
Peters 2006	37	4 (3-5)	11 (ND)	81	-	4 bleeding 1 perforations 10 stenosis
Giovannini 2004	21	3.5 (2-5)	18 (6-34)	62	2	4 bleeding
Seewald 2003	12	5 (1-10)	9 (1-24)	100	-	4 bleeding 2 stenosis

Summary

- Accurate staging
- Indications must be strictly followed
- Prognosis after EMR is comparable to surgery
- Patient preference