

10th Update on Endoscopic Skills

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ESD LIVE

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CASE #1

T. TOYONAGA / Kobe,JP

Flush knife BT

82 yrs old woman, ASA II°

intermittent dysphagia for solids since 3 mo.

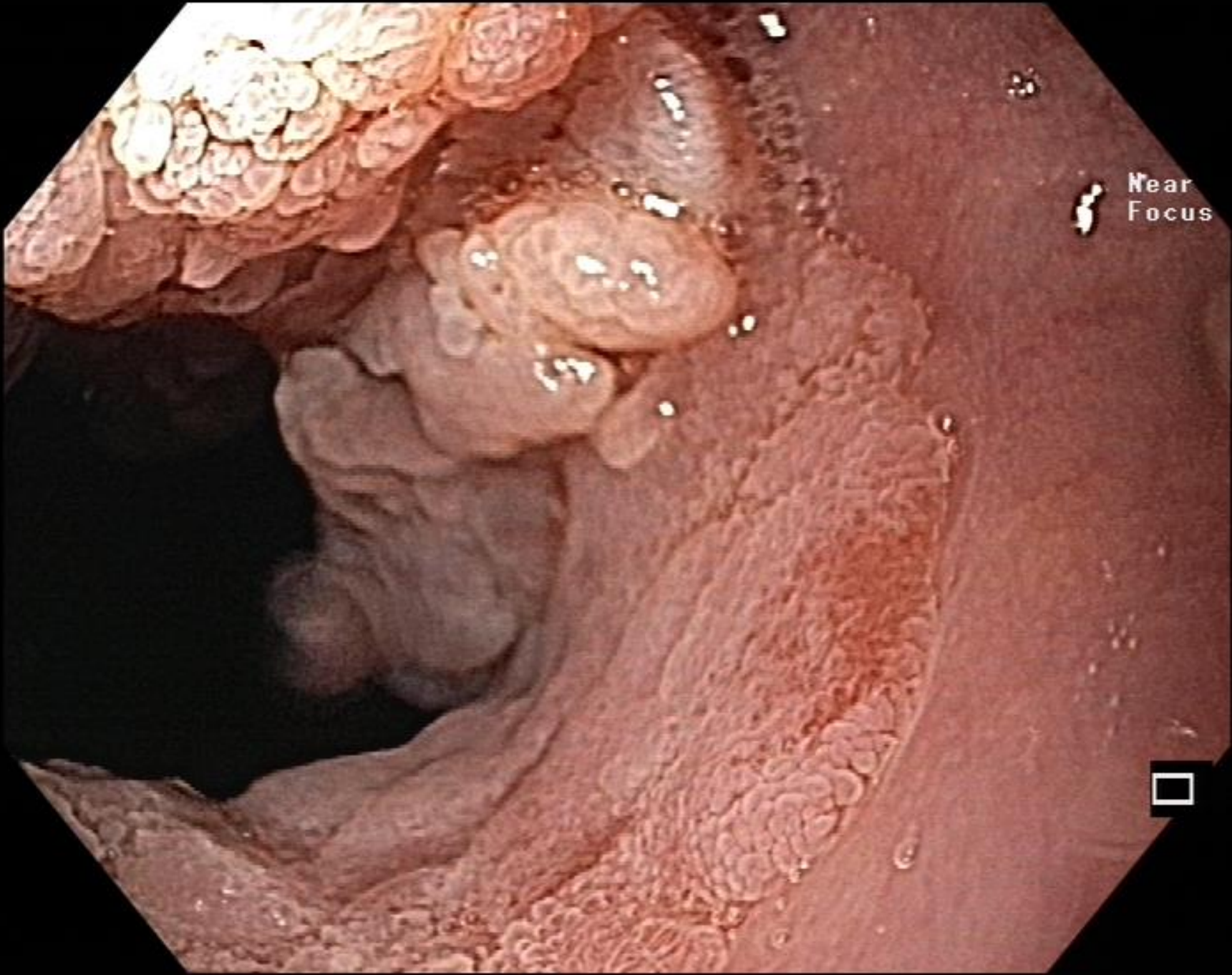
EGD Barrett esophagus BE, C4 M4.5
circumferential neoplasia 0-IIa & 0-Ips, length 4cm
in BE and EG-junction
m-NBI: no loose or highly irregular VP, no unclear SP

Bx WDAC G2. EUS: no signs of sm-invasion

Diag. Early Barrett AC (> 50% probability of T1b)

ESD en-bloc under general anesthesia (ITN)

- ▶ ESD for diagnostic intention (high probability of sm invasion)
(difficult because of extension over fornix fold)

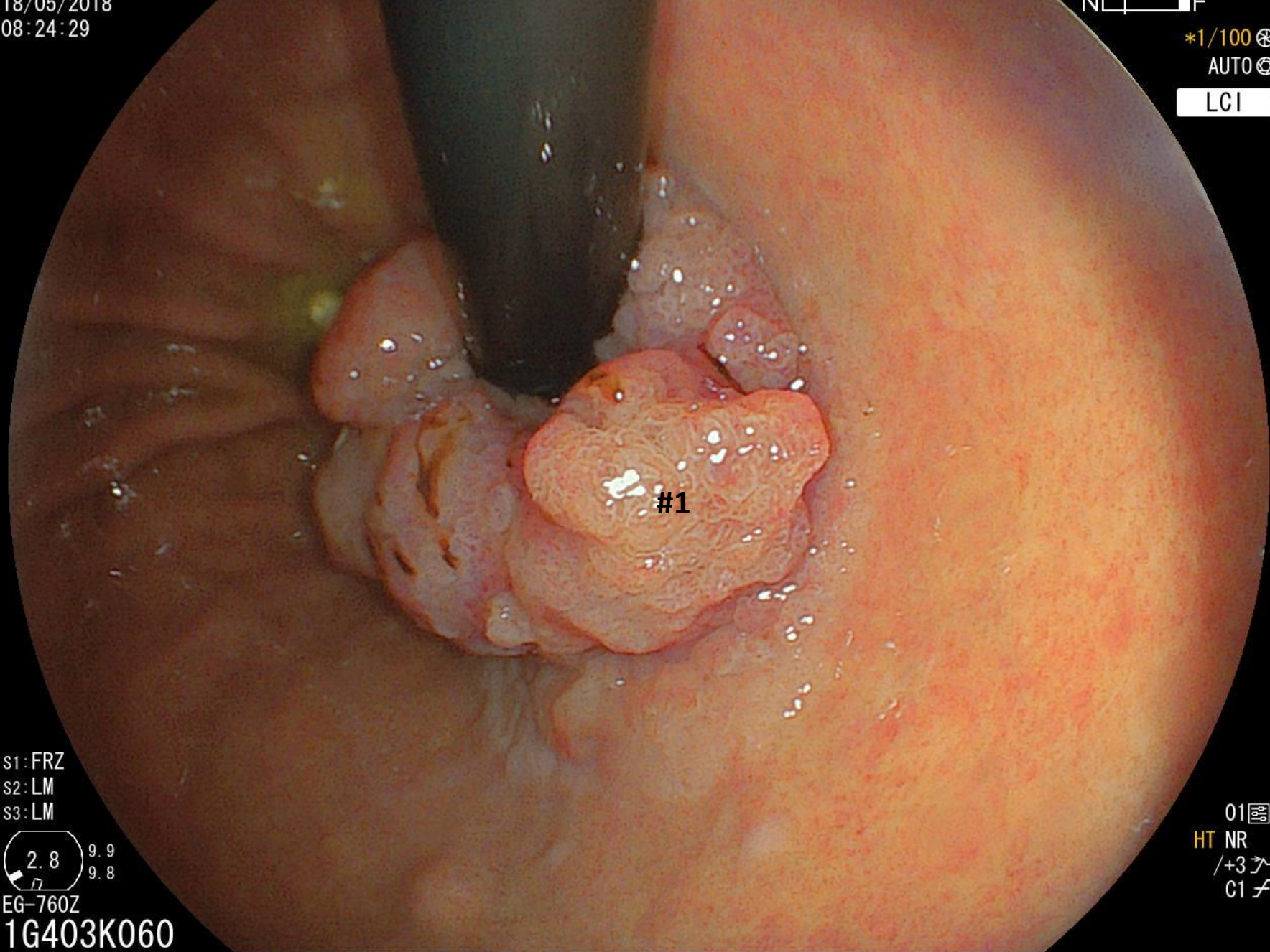


Near
Focus



18/05/2018
08:24:29

NO F
*1/100
AUTO
LCI



S1: FRZ
S2: LM
S3: LM

2.8 9.9
9.8

EG-760Z
1G403K060

01
HT NR
/+3
C1

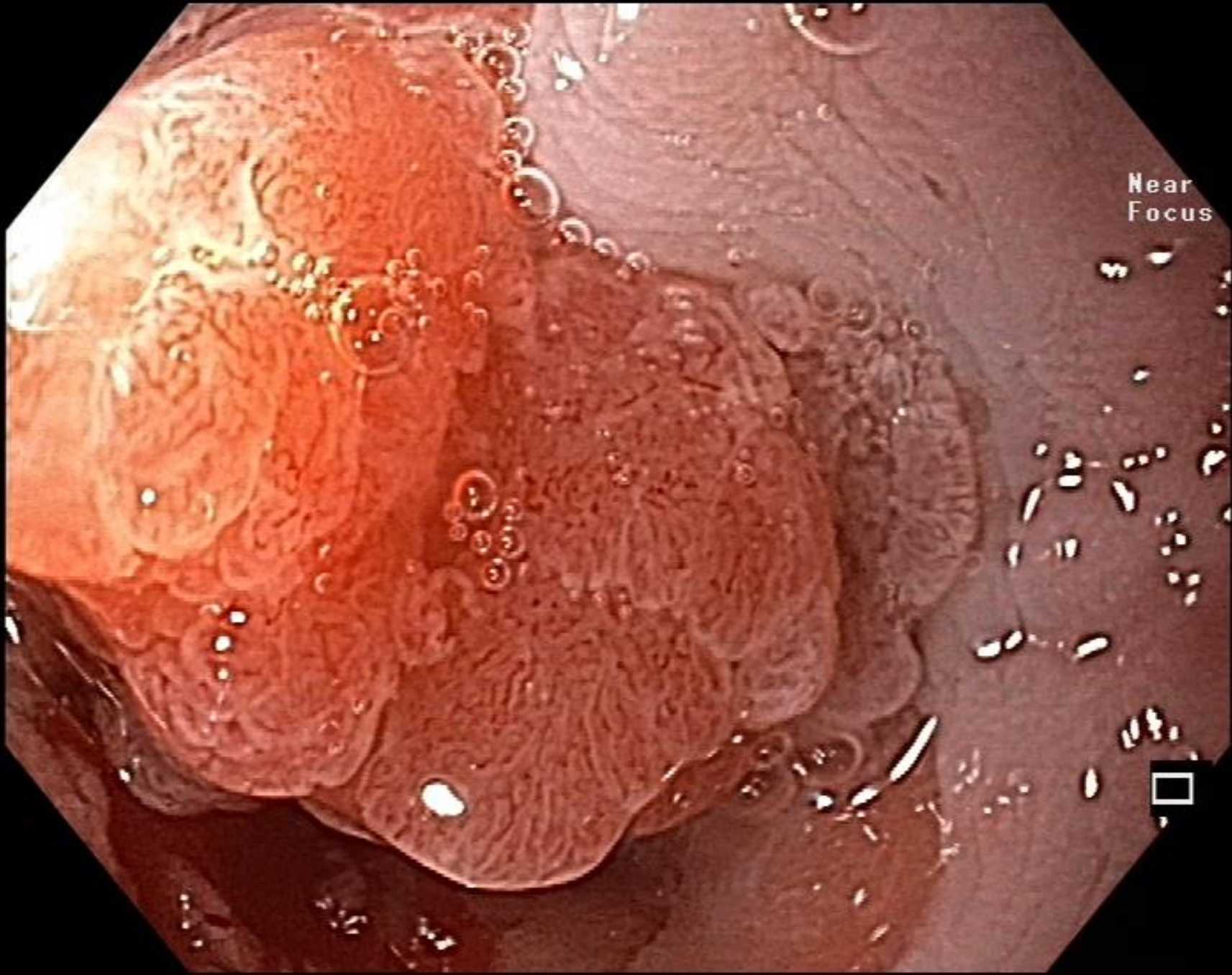
<http://www.gastroenterologie-salzburg.at/>



BL-7000

20178

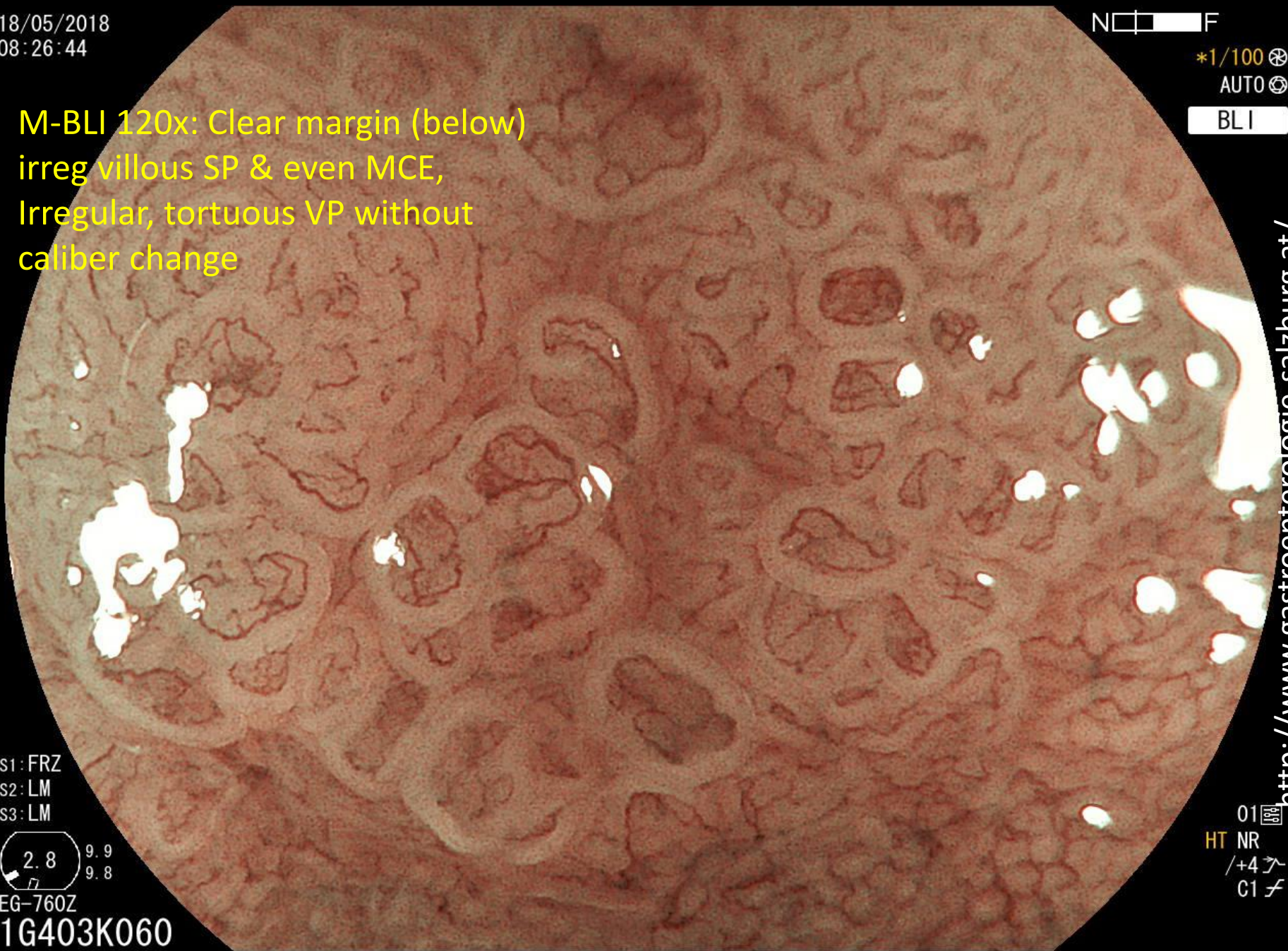
7



Near
Focus



M-BLI 120x: Clear margin (below)
irreg villous SP & even MCE,
Irregular, tortuous VP without
caliber change



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S1: FRZ
S2: LM
S3: LM

2.8 9.9
9.8

EG-760Z
1G403K060

01
HT NR
/+4
C1

Dx: →WDAC, no clear sign of invasiveness

18/05/2018
13:08:34

N F

*1/100
AVE

S1: FRZ
S2: LM
S3: LM

2.8 9.9
9.8

EG-760Z
1G403K060

01
HT NR
SE
♀

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ESD resection bed (small leiomyoma, 8mm, at 5h-margin)

BL-7000

20091 32

18/05/2018
13:36:43

N F

*1/100
Lv+1 AUTO

S1: FRZ
S2: LM
S3: LM

2.8 9.9
9.8

EG-760Z
1G403K060

01
HT NR
SE

<http://www.gastroenterologie-salzburg.at/>

Specimen (after transection) 11 x 6 cm BEAC in villous BE BL-7000

20035 71

ESD (flush knife BT and Hook knife-J, approx. 180 min) **Case #1**

- Gastric part first (retroflex access): 300°-circumferential incision (mucosa bridge on Fornix-side) and SMD up to cardia (~ 2cm),
- Stepwise incision and SMD (~ 2cm) from oral side, until circumferential incision on oral side.
- Placement of 3 clips on distal sm-margin to expose the dissection plane, stepwise completion mainly in retroflex view.

Specimen circular (size after transsection: 11 x 6 cm)

Pathology:

WDAC G1, pT1a (m2), L0, V0, Pn0, Bd 1 (minimal budding)

Resection R 0 → curative resection.

Outcome: discharged home on day 4 after ESD (no pain/dysphagia), (triamcinolon injections 20 x 2.5mg in sm3-residues, repeated qu 10d). So far asymptomatic, no dysphagia or stenosis.