

COMPARISON OF EGD TO EGD WITH EUS IN EVALUATION OF SUB-EPITHELIAL LESIONS OF THE UPPER GI TRACT W. Bigelow¹, B. Sauer², R. Buerlein², A. Copland², V. Shami²

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BACKGROUND

- Subepithelial lesions (SELs) of the upper GI tract are commonly observed during EGD.
- Most lesions are benign, though some carry malignant potential.
- Definitive diagnosis of these lesions determines further management.
- Currently sub-epithelial lesions are initially evaluated with EGD, EUS (endoscopic ultrasound), and potential tissue biopsy.

STUDY AIMS

 Compare the diagnostic accuracy of EGD to EGD with EUS in SELs of the upper GI tract to tissue pathology or a final consensus diagnosis.

METHODS

- Retrospective study of 94 cases with EGD and EUS performed for SELs of the upper GI tract.
- Two expert gastroenterologists (defined as > 10 years experience performing EUS) provided a diagnostic impression based upon EGD images alone followed by EGD with EUS.
- Tissue pathology was recorded for all cases when available.
- Expert consensus on post-review discussion was considered the final diagnosis for remaining cases.

Background: Few studies have quantified the diagnostic benefit of EUS and tissue sampling of SELs.

Aim: We evaluated the accuracy of EGD and EUS impressions for subepithelial lesions of the upper GI tract.

Result: EUS utilization increased the diagnostic accuracy of SELs and should be considered in their work-up.

Mean Median

Male Female

Caucas African Hispani Asian A Unknow

SU	M	M	A	RY	



Accuracy to Final Diagn

RESULTS					
Age	Years	Lesion			
	61.7	GIST			
	64.5	Pancroatic rost			
Sex	Total (%)				
	58 (62)	Lipoma			
	36 (38)	Leiomyoma			
Ethnicity		Carcinoid tumor			
ian	66 (70)	Hyperplastic polyp			
American	24 (26)	Gastric fold			
С	2 (2)				
merican	1 (1)	Fibrotic mass			
'n	1 (1)	Granular Cell Tumor			



RESUL	TS	
	DIAGNOSTIC IMPR	ESSIO
		E
	Tissue Pathology (n=60)	67
	Final Diagnosis (n=94)	71
	 Majority of lesions w followed by pancreat lipomas (11%). Diagnostic impression compared to patholo EUS (p= 0.059). Diagnostic impression compared to final dia 0.001). Kappa correlations con experts for EGD and lindicating substantial 	ere G ic res ns inc gy (60 ns inc agnosi egnosi EUS w l agre
n Diagnostic Impression nosis Accuracy to Final Pathology	both groups.	

Total (%)
41 (44)
22 (23)
11 (12)
7 (7)
7 (7)
3 (3)
1 (1)
1 (1)
1 (1)

CONCLUSIONS

- EUS improved expert advanced endoscopist diagnostic accuracy of upper GI tract SELs.
- Of the 60 cases with tissue pathology, EUS was 78.3% accurate, indicating additional benefit of FNA or biopsy.
- Benign lesions such as lipoma or pancreatic rest were less frequently sampled.
- Intra-observer agreement on diagnosis between advanced endoscopists was substantial for both EGD and EUS.
- Additional prospective studies are needed to better evaluate the diagnostic benefit of EUS and tissue biopsy in evaluating upper GI tract SELs.

