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6th Global Gastroenterologists Meeting

August 11-12, 2016 Birmingham, UK

Endoscopic submucosal dissection: Prospectives on complication prevention and medical comorbidites

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The endoscopic submucosal dissection is the standard of care for the management of early malignant or premalignant neoplasm in the gastrointestinal tract. However, patients with these lesions are often accompanied with significant medical comorbidities. Such as, patients on oral anticoagulation with high thrombotic risk e.g., mitral valve replacement, dual valve replacement, recent myocardial infarction with intervention, end stage renal failure, poorly controlled diabetes, conditions with high anaesthestic risk, etc. Patients with these high risk medical conditions often increase both endoscopic and non-endoscopic complication rate. Combination of careful optimization of medical condition, pre-endoscopic preparation, special endoscopic technique and post-endoscopic management is a must to acheive low complication rate for these high risk population. Endoscopic techniques for prevention of rebleeding included careful identification of all vessels under indigo carmen-free submucosal plane, precoagulation of big vessels, submucosal dissection using coagulation mode, liberal use of coagulation forceps to eradicate all vessel heads at the post ESD wound and prophylactic closure of post ESD wound. Endoscopic techniques for prevention of perforation included maintainance of a good and clear view (Only cut when you see) in an indigo carmen free submucosal plane and prevention of any active bleeding, maintainance of the direction of knife parallel to muscle layer and the direction of cutting away from the muscle layer together with a good traction and slight hooking of tissue (ball-tube type of knife) especially when the direction of knife is perpendicular to the muscle layer. Use of coagulation mode for submucosal dissection is also the key.

Biography

Lui Ka Luen was graduated from the University of Hong Kong in 2004 with distinction in Medicine. He is a specialist in Gastroenterology in Hong Kong and is awarded fellow of the Hong Kong College of Physician in 2012. Then, he further pursued his career on imaging enhanced endoscopy, endoscopic ultrasound, endoscopic submucosal dissection and submucosal tunnel dissection in Japan under direct mentorship of Professor Takashi Toyonaga. He is now an honorary Clinical Assistant Professor at the Chinese University of Hong Kong. He also published paper and invited speaker in various local and international journals, conferences and meetings.

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