Endoscopic Subserosal Dissection for Gastric Adenoma Associated with Severe Fibrosis

Jinwoong Cho*
Department of Internal Medicine, Division of Gastroenterology, Presbyterian Medical Center, South Korea

Clinical Image

The subserosal layer is located between the muscularis propria and the serosa. Usually, the subserosa is not thick enough for successful endoscopic resection. Recent studies have reported Endoscopic Subserosal Dissection (ESSD) for gastrointestinal stromal tumors in the stomach. The subserosa is relatively thick at the cardia, the lesser curvature, and in some part of the fundus and upper body; therefore, lesions at these sites are amenable to safe ESSD. Surgery is indicated in patients with adenoma accompanied by severe fibrosis because of a high risk of perforation after ESD. ESSD can be a useful strategy in these patients. Subserosal dissection is performed after penetration of the muscularis propria. A sufficient subserosal cushion is necessary to minimize the risk of perforation. The method for subserosal injection should be standardized.

Citation:

Copyright © 2020 Jinwoong Cho. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.