

Underwater endoscopic mucosal resection: the best solution for treating local recurrence of duodenal adenoma



The prevalence of duodenal adenomas ranges from 0.10% to 0.82% [1, 2]. Studies show that underwater endoscopic mucosal resection (EMR) is an efficient technique for the treatment of these kinds of lesions, with 87.5% to 100% complete endoscopic resection [3]. However, its use for the treatment of local recurrence after previous duodenal adenoma resection is yet to be well established. We report the case of an 80-year-old woman who presented with a recurrent non-ampullary duodenal adenoma, initially resected by piecemeal EMR (low grade dysplasia) and hybrid EMR for a first recurrence (at 6 months). At follow-up endoscopy (2 years later), a new local recurrence was observed and underwater EMR was performed (▶ **Video 1**). After filling the duodenal lumen with water, the 4-mm lesion floated up into the snare and was easily grasped and completely cut. The resection was macroscopically complete and there were no complications observed. To our knowledge, the role of underwater EMR is yet to be clearly established in the context of recurrent non-ampullary duodenal adenoma. Overall, this technique seems promising for increasing the rate of complete resections, potentially leading to lower recurrence rates. Nevertheless, strong evidence supporting its use in the context of recurrent duodenal adenomas is still lacking and further studies are necessary to fully confirm our hypothesis.

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Competing interests

The authors declare that they have no conflict of interest.



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