

中文題目：內視鏡黏膜下剝離用於上消化道病兆之治療-南部單一醫學中心3年
回塑性研究

英文題目：Endoscopic Submucosal Dissection for Superficial Upper Gastrointestine
Neoplasm-Experience From an Endoscopic Center in South Taiwan

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Background and Aim: Endoscopic submucosal dissection (ESD) is relatively difficult technique dealt with superficial gastrointestinal neoplasm. This retrospective study evaluated the therapeutic efficacy and safety of ESD for upper gastrointestinal lesion in south Taiwan.

Patients and methods: We reviewed all patients who underwent ESD for gastric lesions at Kaohsiung Medical University Hospital in the period between September 2007 and September 2010. A total of 16 lesions in 15 consecutive patients were enrolled in this study. 8 lesions were over stomach and 8 lesions were esophageal lesion. Among the 8 stomach lesions in 8 patients, 5 cases were adenocarcinoma, 2 were adenoma with dysplasia and one was hamatoma. Among the 8 esophageal lesions in 7 patients, 7 lesions were squamous cell carcinoma and one lesion was moderate dysplasia.

Results: The mean operation time was 129.6 minutes. Among the 16 cases, success rate was 93.8%(15/16). One failed and received operation immediately. The major complication rate was 12.5%(3 /16). One case had aspiration event with desaturation during procedure, one encountered major bleeding with transfusion request and one had perforation. All of them stabilized after medical care without surgical intervention. The recurrent rate was 6.3%(1/16). This case found recurrent gastric cancer in the 6th month endoscopic follow-up and received salvage surgical resection smoothly.

Conclusion: ESD is considered to be a therapeutic technique with a higher radical cure for upper gastrointestinal neoplasm treatment, but it may result in a risk of complication. This highly technical procedure needs a high level of expertise and experience to correctly carry out the submucosal dissection and to promptly control any procedure-related complications. Close post-procedure endoscopic follow-up was warranted.