

## Ethical Approval Form From Tianjin Medical University General Hospital

Tianjin Medical University General Hospital ethic number IRB2015-YX-018

<b>TITLE:</b> Clinical Features of Upper Gastrointestinal Serrated Lesions: An Endoscopy Database Analysis of 98,746 Patients		
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### Abstract:

**Background:** Recently colorectal serrated polyps are recognized as important contributors to colorectal cancer. However, detailed information in upper gastrointestinal serrated lesions was limited. We aimed to analyze the clinical features of the serrated lesions in upper gastrointestinal tract (UPGI). **Methods:** Patients with UPGI serrated lesions were consecutively identified. Data of the patients' demographics and histopathology were recorded. Colorectal findings of these patients which underwent colonoscopy simultaneously or within six months were also extracted from colonoscopy database. **Results:** A total of 21 cases in 98,746 patients (0.02%) who underwent esophagogastroduodenoscopy were confirmed to have serrated lesions with predominantly crenated, sawtooth-like configuration. The mean age of 21 patients was  $(55.3 \pm 17.2)$  years old, and 11 cases were male (52.4%). Involving the occurred locations of serrated lesions, 17 cases were found in the stomach (including 3 in the cardia, 9 in the corpus and 5 in the antrum), followed by 3 in the duodenum, and 1 in the esophagus. Serrated lesions could be found in different mucosal lesions, 14 cases were detected in the polyps (8 hyperplastic polyps and 6 serrated adenomas with low grade dysplasia), 3 in the Ménétrier gastropathy, 3 in the inflammation or ulcer, and 1 in the duodenum intramucosal carcinoma. In addition, colonoscopy data was available in 18 patients, and there was a significantly higher colorectal adenoma detection rate in the UPGI serrated lesions group than in the randomly selected age and sex matched group without serrated lesions who also underwent colonoscopy in the same period (38.9% vs 11.1%, odds ratio [OR], 5.091; 95% confidence interval [CI], 1.534-16.890;  $P = 0.010$ ), as well as the detection of advanced adenoma (22.2% vs 4.2%, OR, 6.571; 95% CI, 1.322-32.660;  $P = 0.028$ ). **Conclusions:** Serrated lesions in UPGI can be found in various mucosal lesions with different pathological morphologies. Moreover colonoscopy is likely to be recommended to find concurrent colorectal adenoma for these patients.

**Review comment:** "Clinical Features of Upper Gastrointestinal Serrated Lesions: An Endoscopy Database Analysis of 98,746 Patients" is in accordance with the international code of ethics of biomedical research relating to the people ruled by the Council for International Organizations of Medical Sciences (CIOMS) and the World Health Organization(WHO)(2002), and the study is agreed to conduct.

Tianjin Medical University General Hospital  
Ethics Committee  
April, 2015