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Retrospective Study

Endoscopic mucosal resection of colorectal adenomas > 20 mm: Risk factors for recurrence

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Abstract

AIM: To evaluate risk factors for local recurrence after endoscopic mucosal resection of colorectal adenomas > 20mm.

METHODS: Retrospective data analysis of 216 endoscopic mucosal resections for colorectal adenomas > 20 mm in 179 patients (40.3% female; median age 68 years; range 35-91 years). All patients had at least 1 follow-up endoscopy with a minimum control interval of 2 mo (mean follow-up 6 mo/2.0-43.4 mo). Possible factors associated with local recurrence were analyzed by univariate and multivariate analysis.

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RESULTS: Median size of the lesions was 30 mm (20-70 mm), 69.0% were localized in the right-sided (cecum, ascending and transverse) colon. Most of the lesions (85.6%) showed a non-pedunculated morphology and the majority of resections was in piecemeal technique (78.7%). Histology showed carcinoma or high-grade intraepithelial neoplasia in 51/216 (23.6%) lesions including 4 low risk carcinomas (pT1a, L0, V0, R0 -

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CONCLUSIONS: Endoscopic mucosal resection of colorectal lesions is a ... Recurrence is associated with lesions larger than 20 mm and carcinomas. ... After removal, specimens were mounted on Styrofoam plates and fixed in 10% formalin. ... Local recurrence was defined as the presence of neoplastic tissue on control ...

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... Three cases were found to have a recurrence of lesions.

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