

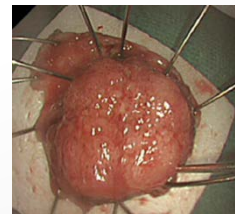
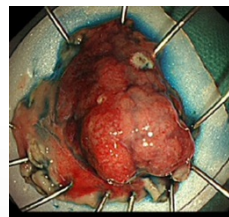
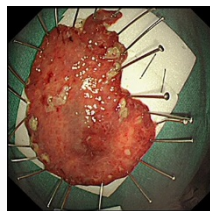
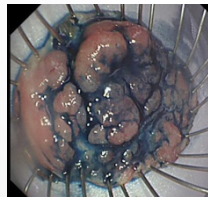
A retrospective review on the outcomes of endoscopic submucosal dissection by gastroenterologist at endoscopy unit in a regional hospital using precedex or conscious sedation

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ESD under precedex or conscious sedation

- ESD is an **advanced** endoscopic procedure
- Some centers in HK performed ESD **under GA in operation theatre**
- However, OT sessions are limited.
- Most expert centers in the world especially in Japan were performing ESD **under conscious sedation or precedex sedation**
- To review all the ESD cases done in endoscopy unit by gastroenterologist in Tuen Mun Hospital from 2015 to 2017



ESD under precedex or conscious sedation

Before

- Airway assessment,
- Optimize co-morbidities
- Decide suitability of precedex

During

- Monitoring (vital, ECG, SaO₂)
- Antidote
- Standard precedex protocol

After

- Monitoring at recovery and general ward



ESD under premedex or conscious sedation

No severe sedation related event

Total lesions: 106

-Respiratory failure requiring intubation or high flow oxygen, hypotension requiring inotropes, or cardiopulmonary arrest

All patients discharged uneventfully and no inpatient mortality

-No medical complications e.g. myocardial infarction or pneumonia or pulmonary embolism etc noted during inpatient stay



Conclusion

- Gastroenterologist –directed precedex or conscious sedation for ESD is safe, feasible with excellent outcome
- Pre-procedure assessment, standard precedex and sedation protocol, and post procedure assessment are also very important

