Daily Challenges in Digestive Endoscopy for Endoscopists and Endoscopy Nurses

BSGIE Annual Meeting 18/09 2014- Mechelen

How to do chromoendoscopy

Tips and tricks

BSGIE Annual Meeting 18-9-2014: Daily challenges in digestive endoscopy for Endoscopists and **Endoscopy Nurses**

> I. Demedts UZ Leuven

> > 1-4%

1,5-3%

0,1% - 0,5%

Reasons to do chromo-endoscopy

- to detect lesions ("red flag" technique)
 - ⇒ panchromo-endoscopy
- to define detected lesions
 - extent/margins
 - → pit pattern (histology)
 - ⇒ localised chromo-endoscopy

Equipment

→ Scope:

- → HD scope
- magnification
- NBI, FICE, I-scan

→ Stains:

- Lugol's stain
- Methylene blue

Acetic acid

- → Stain delivery: syringe, peristaltic pump
 - Spray catheter
 - → ERCP diagnostic catheter
 - → Scope working/irrigation channel



General remarks

→ Take your time:

- → staining
 - aim towards the mucosa
 - (semi)circular movements of scope
 - slowly withdraw or advance scope whilst staining
 - remove excess stain
- → looking at the mucosa

→ Area to be stained:

- → clean, no debris
- → non-inflamed
- → Absorptive stain: use mucolytic agent pre-wash
 - N-acetylcysteine 10% for 2 min

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Lugol's stain

- Use: esophagus (pan-esophageal chromoendoscopy)

 - → look for unstained area's:
 - Dysplastic/neoplastic squamous cells
 - Columnar epithelium (Barrett, cardia, inlet patch)
 - (Reflux) esophagitis

→Cave:

- → contains iodine: do NOT use if allergic
- → may cause burning sensation/pain

Methylene blue

- Use:
 - absorbed in absorptive mucosa
 - → Barrett's esophagus (absorptive): panBarrett
 - → intestinal metaplasia stains blue
 - → look for heterogenous stained area's/unstained area's within homogenous stained area:
 - Dysplasia
 - cardia metaplasia
 - Colon (absorptive +/- contrast enhancement): pancolonic, localised
 - → look for area's with
 - altered staining
 - altered mucosal pattern

Lugol's stain

solution

- → pharmacy prepared vial: 1,5 g I₂ +3g KI in 30 ml aqua
- → stain: 4 ml preparation +16 ml aqua
- → use spray catheter, consider mucolytic prewash





Methylene blue

Solution

- → pharmacy prepared vial: 10 mg MB in 1 ml aqua
- stain:
 - **a** Barrett

1:1 preparation: agua dilution

1 ml preparation in 100 ml aqua

Colon

10 ml preparation in 150 ml aqua: irrigation pump 1 ml preparation in 100 ml aqua: spray

Cave:





- → possible discoloration of urine
- → in Barrett's: mucolytic prewash essential

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Methylene blue

→Barrett: mucolytic prewash

- rinsing with water
- N-acetyl cysteine 10% for 2 min
- → rinse
- → Methylene blue for 2 min
- → Rinse until clear water
- → Stain lasts 5-10 min

Questions?

Acetic acid

→ Use:

- → whitening of mucosa, enhancing mucosal pattern
- → look for area's with altered mucosal pattern

solution

- → 7 ml household vinegar + 14 ml aqua
- → Effect lasts 3-5 min

→Cave:

→ in colon: only localised use, NOT pancolonic



