May 16th, 1:45 PM

The Utilization of Video Capsule Endoscopy in Patients with Peutz-Jeghers Syndrome

Yasir Al-Azzawai

University of Massachusetts Medical School

Let us know how access to this document benefits you.

Follow this and additional works at: https://escholarship.umassmed.edu/cts_retreat

Part of the Digestive System Diseases Commons, Gastroenterology Commons, and the Translational Medical Research Commons

Repository Citation


Creative Commons License

This work is licensed under a Creative Commons Attribution-Noncommercial-Share Alike 3.0 License. This material is brought to you by eScholarship@UMassChan. It has been accepted for inclusion in UMass Center for Clinical and Translational Science Research Retreat by an authorized administrator of eScholarship@UMassChan. For more information, please contact Lisa.Palmer@umassmed.edu.
THE UTILIZATION OF VIDEO CAPSULE ENDOSCOPY IN PATIENTS WITH PEUTZ–JEGHERS SYNDROME

Yasir Al-Azzawi, MD¹, MD, Erik Holzwanger, MD¹, David Cave, MD, PhD²
¹Division of Medicine, ²Division of Gastroenterology, UMass Memorial Medical Center

AIM: Our aim is to demonstrate the utilization of VCE in the patients with Peutz–Jeghers syndrome (PJS) and evaluate the distribution of the polyps in each part of the small intestine and the percentage of patients with PJS who developed complications.

METHODS: Single center, retrospective chart review study of outpatients with PJS who underwent a video capsule endoscopy study between January 2006 and January 2016.

RESULTS: A total of 16 patients were identified with PJS; mean age was 40 years. Female gender was predominant with 9 patients. Polyps were found in the duodenum, jejunum and ileum in 33%, 80% and 26% respectively. Sixty percent of the patients had further evaluation with deep enteroscopy of the small intestine and 88% of them showed small intestine polyps. Colonoscopy was done in 13 of the patients and polyps were found in 11 patients. 33% of patients had complications with intussusceptions or small bowel obstruction and all of them had jejunal polyps. 100% of females had polyps in the small intestine and 33% of them developed complications. 6 patients had polyps larger than 20 mm in the jejunum and 4 had complications with either intussusceptions or small bowel obstruction.

CONCLUSIONS: VCE has the ability to visualize more polyps compared to current deep enteroscopy devices. There is a direct relationship between the size of the polyp, location and the risk of complication. Polyps of at least 20 mm in size, primarily in the jejunum had a high complication rate in this study of 67%. VCE is a valuable tool in evaluating patients with PJS and allows for monitoring of the small bowel and will further help to determine patients at high risk of complications. However, VCE was found in this study to be inferior to upper endoscopy for the detection of gastric polyps.

Contact:
Erik Holzwanger, MD
PGY2, UMass Memorial Medical Center
erik.holzwanger@umassmemorial.org