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**21**  
Name of journal: *World Journal of Gastrointestinal Endoscopy*  
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*Prospective Study*  
**45**  
Histological diagnosis of gastric submucosal tumors: a pilot study of **5** EUS-guided fine-needle aspiration biopsy vs mucosal cutting biopsy

Hisatomo Ikehara, Zhao Liang Li, Jiro Watari, Masato Taki, Tomohiro Ogawa, Takahisa Yamasaki, Takashi Kondo, Fumihiko Toyoshima, Tomoaki Kono, Katsuyuki Tozawa, Yoshio Ohda, Toshihiko Tomita, Tadayuki Oshima, Hirokazu Fukui, Ikuo Matsuda, Seiichi Hirota, Hiroto Miwa

Abstract

**AIM:** To compare the usefulness of ultrasonography-guided fine-needle aspiration biopsy (EUS-FNAB) without cytology and mucosal cutting biopsy (MCB) in the histological diagnosis of gastric submucosal tumor (SMT).

**METHODS:** We prospectively compared the diagnostic yield, feasibility, and safety of EUS-FNAB and those of MCB based on endoscopic submucosal dissection. The cases of 20 consecutive patients with gastric SMT ≥1 cm in dia. who underwent both EUS-FNAB and MCB were investigated.

**RESULTS:** The histological diagnoses were gastrointestinal stromal tumors (n=7), leiomyoma (n=6), schwannoma (n=2), aberrant pancreas (n=2), and one case each of glomus tumor, metastatic hepatocellular carcinoma, and no-diagnosis. The tumors' mean size was 23.6 mm. Histological diagnosis was made in 65.0% of the EUS-FNABs and 60.0% of the MCBs, a nonsignificant difference.

There were no significant differences in the diagnostic yield concerning the tumor location or tumor size between the two methods. However, diagnostic specimens were significantly more frequently



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When the decision is made to perform EUS-guided FNA several technical factors must be considered. The type and size of the needle chosen can affect diagnostic accuracy, ... mucosa), third (submucosa), fourth (muscularis propria) and fifth (serosa or ... before attempting to obtain a biopsy, perform FNA or remove a lesion.

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