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Clinical Trials Study

**Development and validation of a model to determine risk of refractory
benign esophageal strictures**

Qing Lu, Tian-Tian Lei, Yi-Lan Wang, Hai-Lin Yan, Bo Lin, Lin-Lin Zhu,

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Introduction. This study was **designed** to **determine** the long-term clinical success of endoscopic **dilation** and the **rates** of **recurrent** and **refractory esophageal** anastomotic **strictures**. A secondary aim was to identify clinical and endoscopic factors associated with **refractory strictures**.

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The natural history of **refractory benign esophageal strictures** (RBES) is unclear, and surgery or percutaneous endoscopic gastrostomy (PEG) may be the only viable long-term options. The aim of the present study was to assess the long-term outcomes of patients with RBES.

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endoscopic factors associated with **refractory strictures** are lacking. **Risk**-stratifying patients prone to have **strictures refractory** to traditional endoscopic therapies may help **determine** the appropriate timing and relative benefit of endoprosthesis or surgical revision. Furthermore, the prevalence of recurrent and **refractory**



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Despite these treatment modalities, radiation **strictures**, along with anastomotic and caustic **strictures**, remain a common cause of recurrent and **refractory strictures** in the Western World. 9 A recurrent or **refractory esophageal** stricture has been previously defined as an anatomic restriction secondary to cicatricial luminal compromise or ...

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