Description of a new technique using biopsy forceps to stabilize pedunculated polyps for confocal laser endomicroscopy (with video)

The recently introduced technique of confocal laser endomicroscopy (CLE) enables in-vivo microscopic imaging of the mucosal layer of the gut at a subcellular resolution [1,2]. Several studies have shown that CLE has the potential to accurately discriminate between adenomatous and nonadenomatous colorectal polyps, and to enable the evaluation of the degree of dysplasia during ongoing endoscopy [3,4]. Nevertheless, in practice it is often difficult to receive confocal images of pedunculated polyps that are in focus because the polyps often "flap" away from the endoscope, which prevents stable contact between the confocal lens and the polyp tissue. We were confronted with this problem in a patient undergoing surveillance colonoscopy. A large, 15-mm, pedunculated polyp with Kudo pit pattern 3S was visualized in the proximal sigmoid. Despite the size of the polyp, it was not possible to receive confocal images in focus because the polyp was repeatedly pushed away by the endoscope (Pentax EC-3870 CIFK, Tokyo, Japan). By grasping the head of the polyp with a standard biopsy forceps we could pull the polyp toward the confocal lens (○ Video 1; ○ Fig. 1a-c) and receive high-quality confocal images on CLE of the polyp (Video 1; Fig. 1 d). Although it is often difficult to perform CLE in pedunculated polyps we believe that the novel technique described here has the capability to considerably improve diagnostic outcomes.

Competing interests: None

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Video 1

As shown in **Pig. 1**, the head of the pedunculated polyp was grasped with standard biopsy forceps and pulled toward the confocal lens to receive confocal images in focus. Note the blue laser light at the 7 o'clock position.

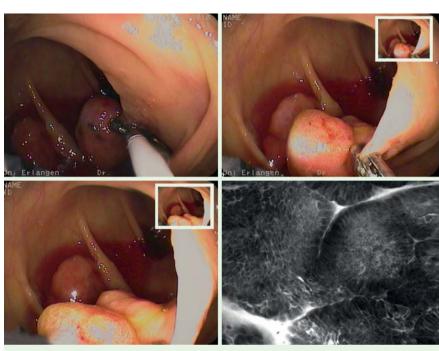


Fig. 1 a – d The head of the pedunculated polyp was grasped with standard biopsy forceps and pulled toward the confocal lens to receive confocal images in focus.

H. Neumann, M. Raithel, M. F. Neurath Department of Medicine I, University of Erlangen-Nuremberg, Germany

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Corresponding author

H. Neumann MD, PhD

Department of Medicine I University of Erlangen-Nuremberg Ulmenweg 18 91054 Erlangen Germany Tel.: +49-9131-85-35000

Fax: +49-9131-85-35209 helmut.neumann@uk-erlangen.de