

Products	Moray® micro forceps
Procedural Area	EUS
Article	Endoscopic ultrasound-through-the-needle biopsy in pancreatic cystic lesions: A multicenter study
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Purpose	To assess the feasibility and safety of micro forceps, specifically designed to be used through a 19-gauge needle after EUS-guided puncture of PCL
Key Points	<p>In a retrospective multicenter study, fifty-six patients with unilocular or oligocystic (less than 5 septa) PCL (pancreatic cystic lesions) without evidence of communication with the pancreatic duct underwent sampling the cystic wall using novel micro forceps.</p> <p>Data was obtained from six academic tertiary referral centers.</p> <p>The sampling procedure was carried out in all 56 patients with the Moray® micro forceps and was technically successful in all 56 cases (100% tissue acquisition).</p> <ul style="list-style-type: none"> • Biopsy specimens were macroscopically visible in 52 (92.9%) cases and processed as standard histological samples. • Specimens were considered adequate for histological diagnosis in 47/56 (83.9%) cases • EUS-TTNB diagnosis of cysts: <ul style="list-style-type: none"> ○ Serous cystadenoma 14/56 (29.7%) ○ BD-IPMN: 10/56 (21.2%) ○ Cystic mucinous neoplasm: 8/56 (17.0%) ○ Pseudocyst: 7/56 (14.9%) ○ Malignant cystic neoplasm: 3/56 (6.4%) • Adverse events occurred in 9/56 (16.1%), however all were considered mild and resolved without any specific intervention.
Conclusions	The EUS-TTNB using the Moray® forceps seems safe and feasible and provides a high diagnostic yield. Additionally, the EUS-TTNB performance is better than that from cytology of cystic fluid or cytohistology of the cystic wall with a 19-gauge FNA/FNB needle and achieved better results than CEA levels in intracystic fluid.