

*IMSUT Hospital***Department of Gastroenterology****消化器内科**

Professor	Hiroaki Ikematsu, M.D., Ph.D.
Associate Professor	Yoshihiro Hirata, M.D., D.M.Sc.
Assistant Professor	Tatsunori Minamide, M.D.

教授	博士(医学)	池	松	弘	朗
准教授	博士(医学)	平	田	喜	裕
助教		南	出	竜	典

The department of Gastroenterology, which focuses on endoscopy and treatment, started in October 2023. We are committed to quality endoscopy, and our mission is to provide careful observation, accurate diagnosis using magnifying endoscopes, and advanced treatments such as endoscopic submucosal dissection (ESD). In addition, collaborating with various departments for comprehensive, minimally burdensome patient care.

1. Introduction

We primarily focus on endoscopic examinations for the early detection and treatment of esophageal, gastric, and colorectal cancers. Our mission is to provide painless endoscopic procedures, thorough and minimally overlook observations, precise diagnoses using magnification endoscopy, and advanced endoscopic treatments, particularly Endoscopic Submucosal Dissection (ESD). We aim to provide prompt endoscopic examinations and treatments for patients referred from other hospitals and clinics. In addition, we tailor our approach to each lesion by selecting the most appropriate treatment option and collaborating with Oncology, Surgery, Radiology, and other departments to deliver care that minimizes the burden on the patient's overall well-being. The outpatient clinic treats all gastrointestinal diseases and also offers *Helicobacter pylori* outpatient clinic.

2. Endoscopic examination

Endoscopic examinations are conducted for screening, investigating symptomatic cases, and precisely diagnosing and treating lesions. Additionally, procedures such as gastric fistula construction, ileus

tube insertion, and stent placement are also performed.

When a lesion is detected, a magnifying endoscope is used to closely examine the surface microvasculature and pit patterns. Endoscopic treatment options encompass cold polypectomy, hot snare polypectomy using bipolar snare, EMR (Endoscopic Mucosal Resection), and ESD (Endoscopic Submucosal Dissection), selected based on the size, morphology, and depth diagnosis of the detected lesion.

The number of endoscopies and ESDs during the year were as follows; upper endoscopy: 1034 cases, colonoscopy: 977 Esophageal ESD: 4 cases, gastric ESD: 32 cases, and colorectal ESD: 33 cases. The number of upper endoscopies and colonoscopies increased by more than 100 cases and the number of ESD cases also increased by 1.6 times compared to last year.

We plan to significantly increase both the number of endoscopic examinations and treatments in the next year and beyond.

3. Treatment of drug-resistant *Helicobacter pylori* infection

Some patients fail to respond to first- and second-line *Helicobacter pylori* (*H. pylori*) eradication therapy, but third-line eradication is not always done.

Meanwhile, penicillin allergy patients do not take routine eradication medicines because insurance coverage regimens in Japan include amoxicillin. In H. pylori out-patient clinic, we make correct diagnosis of infection by multiple modalities, give eradication therapy for these refractory patients, and achieve high rates of successful eradication.

In 2025, 52 patients (17 with drug allergies, 26 with drug-resistant H. pylori) visited our hospital and received eradication treatment. Of these patients, 94% were successfully eradicated.

4. Clinical research

We are engaged in clinical research to address clinical questions in the field of gastrointestinal endoscopy. We have continued patient enrollment for the EVEREST trial, a randomized controlled trial evaluating the usefulness of narrow-band imaging (NBI) or iodine staining for surveillance after endoscopic resection of esophageal squamous cell carcinoma. Case enrollment is progressing smoothly, with 170 cases enrolled by the end of December 2025. We will continue to conduct clinical research to develop novel diagnostic and therapeutic approaches.

5. Publications

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