



The attitude of Asian endoscopist toward endoscopic ultrasonography

Since 1980s, endoscopic ultrasonography (EUS) has emerged as a valuable endoscopic tool for the diagnosis and treatment of gastrointestinal diseases and became the most accurate medical imaging modality for the diagnosis and staging of gastrointestinal malignancies. Fine needle aspiration increased the accuracy of EUS in nodal staging of tractus and pancreato-biliary diseases. Its usefulness is not only limited to the gastrointestinal tract but also brings an important role in staging of non-small cell lung cancer and mediastinal diseases. Most of the studies have demonstrated that EUS can alter management decisions in intramural and extramural mass lesions, especially when other modalities are inconclusive. However, it remains unclear how clinicians use EUS in their practices and whether their institutions have EUS or not. For appropriate targeting of education, training and plan to set up EUS devices in hospitals, it is mandatory that clinician attitudes toward EUS be systematically studied.

There have been studies evaluating physicians' attitudes and practice pattern. Some studies investigating the attitudes of physicians and surgeons in the United States determined that EUS was utilized in the management of GI malignancies and, utilization of EUS was similar across specialties (1). In their study, Bhutani et al. (2) have explored the utilization of EUS among non-gastroenterologist. They evaluated the attitudes of medical, surgical and radiation oncologists toward EUS in the United States and stated that the utilization of EUS do not necessarily follow established guidelines. Kalaitzakis et al. (3) planned a survey of four European countries to assess EUS availability as well as EUS utilization among clinicians. They concluded that overall utilization of EUS varies considerably among different countries. They found that the availability of EUS was a major determinant of EUS utilization. A shortage of

trained endosonographers and the high cost were the major handicap.

Several reports on Western endoscopists' clinical attitudes toward gastrointestinal malignancies have been published (1-3). However Eastern endoscopists' clinical attitudes in this regard remain unknown. We know that the attitudes of Western and Eastern endoscopists toward early gastrointestinal malignancies are not similar. Eastern endoscopists prefer to treat early GI malignancy endoscopically. Since the incidence of GI malignancy is different between Western and Eastern countries, the value of EUS can be variable in different parts of the world.

Lee et al. (4) designed a study, which is published in this issue of TJG, to determine the attitudes of Asian endoscopists toward EUS. Because of the biennial gastric cancer screening in South Korea, the early detection rate for gastric cancer is very high. Endoscopic submucosal dissection and endoscopic mucosal resection are commonly used by South Korean physicians. They concluded that EUS is highly valuable for Korean gastroenterologists in the evaluation of early esophageal, gastric, colonic cancers as well as subepithelial lesions. Being the first study on this topic from the Eastern part of the world, it is a valuable paper. These kinds of studies are important for determining physicians' attitude toward different diagnostic and therapeutic tools and for emphasizing the value of some new methods.

Orhan Tarçın

Department of Gastroenterology, Liv Hospital, İstanbul, Turkey

REFERENCES

1. Ahmad NA, Kochman ML, Ginsberg GG. Practice patterns and attitudes toward the role of endoscopic ultrasound in staging of gastrointestinal malignancies: a survey of physicians and surgeons. *Am J Gastroenterol* 2005; 100: 2662-8. [CrossRef]

Address for Correspondence: Orhan Tarçın, Department of Gastroenterology, Liv Hospital, İstanbul, Turkey

E-mail: ortarcin@hotmail.com

© Copyright 2014 by The Turkish Society of Gastroenterology • Available online at www.turkjgastroenterol.org • DOI: 10.5152/tjg.2014.0003

2. Reddy NK, Markowitz AB, Abbruzzese JL, Bhutani MS. Knowledge of indications and utilization of EUS: a survey of oncologists in the United States. J Clin Gastroenterol 2008; 42: 892-6. [\[CrossRef\]](#)
3. Kalaitzakis E, Panos M, Sadik R, Aabakken L, Koumi A, Meenan J. Clinicians' attitudes towards endoscopic ultrasound: a survey of four European countries. Scand J Gastroenterol 2009; 44: 100-7. [\[CrossRef\]](#)
4. Tae Hee Lee, Eun Young Kim, Jin-Oh Kim, Kwang-Hyuk Lee, Ji Sung Lee. South Korean endoscopists' attitudes toward endoscopic ultrasound for the evaluation of gastrointestinal diseases. Turk J Gastroenterol 2014; 25: 63-9.