

Clinical, surgical and endoscopy gastroenterology must always go together

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Dear reader,

In the fight against the COVID-19 pandemic, Brazil has for a very long time retained the top rank for highest number of cases and number of deaths. This undisputable fact required determination and coordination of the entire world's medical fraternity, that tried calmly but not easily, to remain oblivious to the various non-orthodox attitudes from the leaders around the world. Doctors, who respect the commandments of the Hippocrates⁽¹⁾, discussed in an elegant, intelligent, and shrewd way about the conducts in the daily clinical practice. In fact, we always want to know and do the best for our patients, always in a humane way to avoid their suffering.

Currently, there is a lot of debate about whether medical journals are trustworthy or not, especially after the politization by the editorial boards of some of the most important medical journals! Our proposal is not and will never be political. Our discussion will be based in evidence and science, always coming from studies with robust methodologies and as we could not fail to mention, our most important gastroenterology journal, *Arquivos de Gastroenterologia (Archives of Gastroenterology)*, which in addition to disseminating knowledge in the field of clinical and surgical gastroenterology, has also become a valuable communication vehicle for the dissemination of scientific results in digestive endoscopy, an important medical specialty.

Clinical, surgical, and endoscopy gastroenterology must always go hand in hand, as one complements the other! However, this symbiotic capacity, without any kind of rupture in the dominance of each of them in the scope of their activities, is what leads to the development of the specialty as a whole. Despite the politization of choices, judicialization of decisions, fallacies in describing facts, little effective action, and delays in important movements, medical publications have been increasingly present, allowing for the uncontested development of practically all specialties. Doctors and teams dedicated to the evolution of science do not fight, they continue to define strategies and measures to mitigate the suffering of patients affected by any type of disease, new or old, which impairs the quality of life of human beings, whether from a financial to an emotional standpoint.

The **Archives of Gastroenterology** is the main communication vehicle dedicated to teaching clinical, surgical, and digestive endoscopy in Latin America, due to its excellence in the selection of studies being received from all over the world! The journal has 540 active reviewers, a considerable army of professionals to evaluate articles. When we analyze the annual submission numbers and compare it against the rejection rate of the last 5 years, we note that in 2016 these were 90 and 32%, in 2017 (92 and 32%), in 2018 (130 and 37%), in 2019 (162 and 40%) and in 2020 (192 and 47%), respectively. These numbers unquestionably reveal the growth of national scientific production, due to the increase in the number of submissions, as well as the interest in publishing in this journal.

For this reason, I invite you to appreciate the n. 3 of vol. 58 with 27 interesting studies, being: 19 originals, five e-videos, one brief communication, one letter to the editor, and one review. There, you will find nine interesting studies on digestive endoscopy, showing that the national scientific production has increased considerably in this specialty. Among them, the study on post-endoscopic retrograde cholangiopancreatography pancreatitis (ERCP) prophylaxis stands out, in which authors evaluate the use of two regimes with different non-steroidal anti-inflammatory drugs⁽¹⁾. This subject is currently under the spotlight, as the occurrence of ERCP is one of the most feared complications and the discussion of how to prevent this adverse event is important to improve the quality, safety, and performance of this procedure, which is so important to the therapeutics on the biliopancreatic system. This topic is so important that there are numerous systematic reviews and meta-analyses published on this matter⁽²⁾. Percutaneous endoscopic gastrostomy in children and adolescents is an advanced endoscopic technique that deserves to be highlighted. The authors of this study emphasize the results of this technique, which is frequently performed in adults and the elderly, who needs adequate nutrition⁽³⁾. The impact of COVID-19 is present in a publication developed by the Curitiba's group. In this study, the authors show that the risk factors for upper gastrointestinal bleeding were modified due to COVID-19 in the patients undergoing urgent endoscopic exams⁽⁴⁾.

Technical details of colonoscopy are also highlighted in the analysis about the impact of retroversion on the detection of

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proximal colon lesions in a large-volume tertiary private hospital, showing that this maneuver, performed by experienced physicians, improves the detection of lesions in the proximal colon, as they are small. Injuries can remain hidden behind folds that are sometimes hard to see⁽⁵⁾.

Another interesting study produced by the discipline of coloproctology at the University of São Paulo (Ribeirão Preto), demonstrated that the teaching of basic skills during the colonoscopy exam allows the applicability of quality and safety standards⁽⁶⁾. Nowadays, digestive endoscopy services around the world are concerned with improving their skills and qualities in detecting injuries and treating them. The quality of endoscopic procedures must be evaluated by standards created and used in practice so that we can improve what is offered to patients. Furthermore, an important technical point was the published study of Schacher and cols who evaluated the results of the underwater endoscopic resection of colorectal polyps, a technique that is on the rise due to its effectiveness, improved skills and low complication rate⁽⁷⁾.

Finally, I invite everyone to enjoy the newly created e-video session, which offers clinical cases or case series in the form of videos with no more than 4 minutes, exposing the problems faced by surgeons and/or endoscopists in the diagnosis and/or treatment of the various diseases of the digestive system. This is a successful section at **Archives of Gastroenterology**, receiving contributions from all over the world! In this publication, five interesting e-videos were published, a record! Surgical treatment based on endosonography and ERCP findings in bile duct intraductal papillary mucinous tumors associated with invasive adenocarcinoma is presented in one of them, highlighting the characteristics of both exams of this rare disease⁽⁸⁾. Duodenal papilla somatostatinoma is rare and may be followed by choledocholithiasis. This video describes in detail

the staging, with fantastic images of the endoscopic papillectomy and the results of the treatment in a long-term follow-up, safely demonstrating that this type of treatment is effective and safe when properly indicated⁽⁹⁾. Pancreatoduodenectomy is a surgery that has a high rate of morbidity and mortality and some complications that are difficult to treat, such as digestive fistulas. The authors of this e-video, entitled “Definitive pyloric closure for the treatment of digestive fistula after pancreaticoduodenectomy with “over-the-scope” clip (padlock)”, shows that endoscopic techniques for tissue suture and raffia using as an access route have been increasingly carried out, in addition to the inventiveness of the multidisciplinary team composed of surgeons, gastroenterologists, and radiologists⁽¹⁰⁾.

The videos of the surgical category, which I can't avoid, are very insightful. In this section, you can see the e-video of the first central hepatectomy performed robotically to resect a hepatocellular carcinoma⁽¹¹⁾. In this procedure, the selective clamping of the hepatic artery instead of the traditional Pringle maneuver to limit the blood loss during surgery! The last video gives us impressive images, describing in detail the laparoscopic management of a giant choledochal cyst associated with intrahepatic lithiasis, with technical and clinical success⁽¹²⁾.

There is no doubt that reading this edition will be fruitful and will provide precious information for coping with the most diverse diseases of the digestive system always based on robust scientific evidence.

Hope you enjoyed the reading.

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Ardengh JC, Kakar M. A gastroenterologia clínica, cirúrgica e a endoscopia devem sempre caminhar juntas. *Arq Gastroenterol.* 2021;58(3):267-8.

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