

## **Abstract**

The endoscopic diagnosis of early gastrointestinal cancer is challenging. It depends on technical issues associated with a high suspicion in patients with risk factors. Our aims are to discuss the current situation of endoscopic diagnosis of early gastrointestinal cancer in Rio de Janeiro and to demonstrate two cases of superficial esophageal cancer that were treated by endoscopic techniques. Both cases were diagnosed during a screening program in patients with previously treated head and neck squamous cell carcinomas.

Lesions were small, located in the upper thoracic esophagus. Endoscopic diagnosis was performed using white light followed by chromoendoscopy (digital FICE/NBI and Lugol dye solution). One bite biopsy specimen was taken and histopathological analysis was made before endoscopic treatment.

EMR variations, using the elastic band ligation device (EMR-L) and an oblique cap (EMR-C) were the methods chosen for resection. There were no complications, except for minor bleeding and it was possible *en block* resection in the two cases.

The pathology confirmed squamous cell carcinoma limited to mucosa. Follow-up endoscopy 3 months later only shows a scar.