

Endoscopic dilatation in Crohn's disease

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Although penetrating disease will often require surgical resection, stricturing may be amenable to endoscopic treatment. This may be accomplished by enteroscopy or colonoscopy, depending on the site of the stricture. Dilatation of an the risks of perforation, but balloon dilatation of fibrostenotic - disease may result in substantial symptomatic improvement and obviate the need for surgery in selected cases. It is most suited for short (<5 /uni00A0 cm) fibrostenotic strictures, including those seen at a previous anastomosis.

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