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**Technical performance and diagnostic yield of motorised spiral enteroscopy compared with single-balloon enteroscopy in suspected Crohn’s disease - Pal P, Ramchandani M, Banerjee R, et al.**

Pal P, Ramchandani M, Banerjee R, et al. [*Technical performance and diagnostic yield of motorised spiral enteroscopy compared with single-balloon enteroscopy in suspected Crohn’s disease*](https://gut.bmj.com/content/72/10/1866): a randomised controlled, open-label study (the MOTOR-CD trial) Gut 2023; 72: 1866-1874. doi: 10.1136/gutjnl-2023-329885.

Despite significant advances in diagnosing IBD (inflammatory bowel disease), there still remains uncertainty in how best to evaluate suspected small bowel Crohn’s disease (CD). Balloon enteroscopy and in particular single-balloon enteroscopy has been considered an important diagnostic tool to obtain tissue to support a new diagnosis. More recent studies have suggested motorised spiral enteroscopy may offer advantages over single-balloon enteroscopy, however no randomised controlled comparison had been undertaken in CD.

In the MOTOR-CD trial, Pal et al., sought to compare motorised spiral enteroscopy with single-balloon enteroscopy in patients with a possible new-diagnosis of small bowel CD.

125 patients were recruited at a tertiary referral centre in India, and randomised to bi-directional motorised spiral enteroscopy (n=62) or to bi-directional single-balloon enteroscopy (n=63).

The primary outcome measure was technical success, as defined by the ability to reach the anatomical location of interest identified by prior cross-sectional imaging or capsule endoscopy. There was no statistically significant difference in technical success between either procedure, with motorised spiral enteroscopy having a numerically higher rate of technical success at 98.4% compared to 90.5% with single-balloon enteroscopy.

Secondary outcome measures included; diagnostic yield, depth of intubation, procedural time, and adverse events. Despite some numerical differences, there was no statistically significant difference between the two procedures.

Pal et al., therefore, conclude that motorised spiral enteroscopy and small bowel enteroscopy are both valid tools to help establish a diagnosis of small bowel CD.

Subsequent to MOTOR-CD, the motorised spiral enteroscope used in this trial has been globally recalled from practice pending potential safety concerns.