

## Report: Fellows Masterclass in Basic Endoscopy

Charlotte Maxeke Hospital

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Thanks to the medical gastroenterologists at the Charlotte Maxeke Johannesburg Academic Hospital (CMJAH), a 2-day Fellows Masterclass in Basic Endoscopy was held at CMJAH, Johannesburg on the 18-19th of December 2025.

The workshop comprised of a combination of practical didactic lectures with live cases. The live cases were streamed to the auditorium with two-way communication affording the participants an opportunity to engage live with the endoscopy room. The workshop covered practical aspects in everyday endoscopy that are less often discussed, with the aim of catering for fellows at all levels of experience. The teaching style was based on the practical deconstruction of everyday endoscopic techniques and principles. This was showcased through live cases and split into 2 days covering the upper and lower gastrointestinal tracts.

Headed by Dr Didintle Mokgoko, Dr Neo Seabi and Dr Vikash Lala, the first day started off with greetings with an introduction of the specialists, fellow attendees and the trade representatives.

The group of fellows were mostly comprised of medical gastroenterology trainees, but also included paediatric gastroenterology and local GI surgical fellows from the various academic training centres around South Africa. With the majority of the fellows being within their first year of study it provided a much welcomed opportunity to network within the community.



CMJAH endoscopy unit

The first day was focused on lower endoscopy beginning with Dr Lala, who completed an Advanced Endoscopy fellowship in Belgium, starting off with lectures on the basics of colonoscopy. The lectures focused on scope handling techniques, getting to and assessing the caecum, the endoscopic assessment of colorectal polyps and principles of cold snare polypectomy. This was followed by a practical demonstration with a colonoscope where Dr Lala essentially walked through setup of the scope stack, ergonomics, scope handling, scope manipulation, the recognition of loops and principles in loop resolution. What



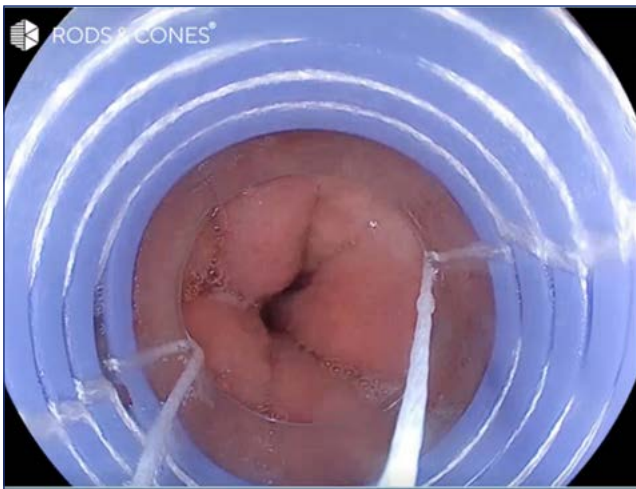
Dr Vikash Lala demonstrating loop mechanics on a colonoscope



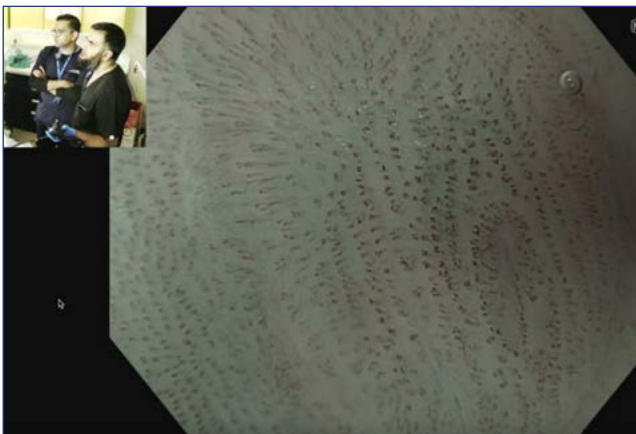
**Dr Lala (left), alongside Dr Mokgoko demonstrating cold snare polypectomy during colonoscopy**

was particularly useful was the physical demonstration of the common, basic yet unrecognised mistakes endoscopists make outside of the patient and how to fix them – this included demonstrating how spirals and loops are created and how to consciously fix them.

Dr Mokgoko, who completed her subspecialisation at CMJAH and continues to work as a consultant there, took us for the first live case, which was streamed from the endoscopy room to the boardroom for us all to watch and interact. She essentially



**Live case and demonstration of oesophageal variceal banding performed by Dr Mokgoko**



**Dr Khan (right) assessing intrapapillary capillary loops in the oesophagus with a high definition gastroscop**

walked through the basics of colonoscopy, reiterating many of the points provided earlier by Dr Lala. She also demonstrated the water immersion technique and the appropriate use and benefits of a scope guide.

Dr Seabi, who is the Head of Department for Gastroenterology at CMJAH, provided both an excellent lecture and live case on endoscopy in IBD with a focus on the endoscopic grading of IBD activity and the recognition of IBD associated dysplasia. Dr Lala ended off the last case demonstrating cold snare polypectomy techniques, including tips on handling and manipulating a snare and performing cold snare polypectomy in difficult to access areas. In addition, he demonstrated how to recognise post-polypectomy scars and how to assess them for residual or recurrent disease.

The second day started off with the basics of gastroscopy discussing common mistakes, use of procedural sedation and how to avoid post-gastroscopy upper GI cancer. The lectures included the endoscopic recognition of oesophageal dysplasia and early oesophageal cancer (squamous and Barrett's) as well as how to assess an atrophic gastritis for intestinal metaplasia, dysplasia and early gastric cancer. Additionally, Dr Uzayr Khan a hepatobiliary surgeon at CMJAH discussed oesophageal dilatations. These were followed by live cases for most of the topics, where Dr Lala demonstrated how to use high definition, chromoendoscopy and acetic acid to assess a Barrett's oesophagus. Dr Mokgoko then demonstrated the management of upper GI bleeding with a live case of a peptic ulcer and a demonstration of how to perform oesophageal variceal banding and what to do when things don't go quite as planned. This was followed by Dr Lala assessing and resecting hyperplastic gastric polyps in a patient with GI bleeding. To close the live cases, Dr Khan showed the use of high definition endoscopic imaging in assessing oesophageal intrapapillary capillary loops for dysplasia and early malignancy. This is often poorly taught and under recognised in clinical practice.

The workshop concluded with a fun quiz and prize giving followed by a feedback session which was positive all in all.

There were tea and lunch breaks of course, with delicious treats and food (and coffee!) provided by sponsors throughout the workshop. The medical endoscopy and device representatives also set out wonderful workstations where you could handle devices such as snares or clips allowing participants to get a feel for them whilst explaining how these devices work.

All in all, this basic endoscopy masterclass was a must for both junior and senior fellows doing endoscopy as part of their specialty training. The approach of starting at the very basics was appreciated as even some of the more experienced endoscopists learnt new subtleties to their technique. The blend of both lectures and live cases on particular topics was well balanced and synergistic to our learning experience.

A huge and well deserved thank you to Dr Neo Seabi, Dr Vikash Lala, Dr Didintle Mokgoko, Dr Uzayr Khan, the endoscopy nursing staff, the medical representatives, the anaesthetists and sponsors for an excellent fun, collaborative and informative endoscopy workshop. The effort put in to upskilling future endoscopists is greatly appreciated.

We thank our industry partners for supporting the event and assisting participants with travel arrangements (Vertice, Olympus/Surgical innovations, Marcus Medical, Tecmed, Boston Scientific, First Medical and Obsidian health/ERBE)



A group photo to close a fun, interactive and true masterclass in everyday endoscopy