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**AMA Establishes CPT Codes for Minimally Invasive ESD Procedure****Recognitions Illustrate Commitment to Work-Life Balance, Supporting Employees**

CENTER VALLEY, Pa., (May 26, 2025) – Olympus Corporation of the Americas announced today the American Medical Association (AMA) Current Procedural Terminology (CPT®) Editorial Panel has published its Summary of Panel Actions and has agreed to establish two Category I CPT codes for the Endoscopic Submucosal Dissection (ESD) procedure: one code for the upper GI tract and one code for the lower GI tract.<sup>i</sup> The final code numbers, code descriptors and fee schedules will be published in November 2026, and the codes are anticipated to become effective January 1, 2027.



Endoscopic Submucosal Dissection is a minimally invasive, organ-sparing endoscopic procedure used to diagnose and treat cancerous and pre-cancerous neoplasms of the gastrointestinal (GI) tract.

The dedicated CPT codes for the ESD procedure will allow for more widespread clinical adoption of the procedure and remove barriers to patient access. This will be facilitated through a standardized and streamlined reimbursement process for health care providers and payers.

"We applaud the AMA's decision to establish these new CPT codes, which will help more patients and physicians access the ESD procedure for the minimally invasive treatment of pervasive GI diseases and disorders," said Paul Skodny, Senior Director for Health Economics and Market Access at Olympus Corporation. "This positive result is the culmination of much hard work and broad support for creating this reimbursement pathway."

ESD is a minimally invasive, organ-sparing endoscopic procedure used to diagnose and treat cancerous and pre-cancerous neoplasms of the gastrointestinal (GI) tract. Rather than surgically removing whole sections of the GI tract through incisions on the skin, physicians remove tumors through natural orifices, via an endoscope, in one piece. This technique enables accurate staging of these lesions by pathologists, leading to less recurrence rates than other endoscopic methods.<sup>ii</sup> Without large incisions or having sections of organs removed, patients experience less pain, faster healing and may not suffer the potential consequences of segmental resections.<sup>iii,iv</sup>

“We are thrilled to reach this significant reimbursement milestone for the ESD procedure,” said Mike Callaghan, General Manager for EndoTherapy at Olympus Corporation. “Olympus has been at the forefront of developing ESD solutions since the procedure was first pioneered by Japanese clinicians working collaboratively with Olympus. This decision by the AMA will facilitate broader adoption of this procedure in the U.S., and it will enhance patient care by providing more patients with access to an advanced and novel treatment option.”

Visit the Olympus Americas ESD web page for more information about the ESD procedure: [medical.olympusamerica.com/endoscopic-submucosal-dissection](https://medical.olympusamerica.com/endoscopic-submucosal-dissection)

### **About Olympus Corporation of the Americas**

At Olympus, we are committed to Our Purpose of making people’s lives healthier, safer and more fulfilling. As a global medical technology company, we partner with healthcare professionals to provide solutions and services for early detection, diagnosis and minimally invasive treatment, aiming to improve patient outcomes by elevating the standard of care in targeted disease states.

For more than 100 years, Olympus has pursued a goal of contributing to society by producing products designed with the purpose of delivering optimal outcomes for its customers around the world.

Olympus Corporation of the Americas, a wholly owned subsidiary of Olympus Corporation, is headquartered in Center Valley, Pennsylvania, USA, and employs more than 4,500 employees throughout locations in North and South America. For more information, visit [medical.olympusamerica.com](https://medical.olympusamerica.com).

<sup>i</sup> Summary of Panel Actions. AMA-ASSN.org. Updated May 16, 2025. Accessed May 20, 2025. <https://www.ama-assn.org/system/files/may-2025-summary-of-panel-actions.pdf>.

<sup>ii</sup> Fukami, N. Endoscopic Submucosal Dissection in the Esophagus: Indications, Techniques, and Outcomes, *Gastrointestinal Endoscopy Clinics of North America*. 2023;33(1);55-66. doi:10.1016/j.giec.2022.09.003.

<sup>iii</sup> Abdelfatah MM, Barakat M, Ahmad D, Ibrahim M, Ahmed Y, Kurdi Y, Grimm IS, Othman MO. Long-term outcomes of endoscopic submucosal dissection versus surgery in early gastric cancer: a systematic review and meta-analysis.

Eur J Gastroenterol Hepatol. 2019;31(4):418-424. Doi:10.1097/MEG.0000000000001352. PMID: 30694909

<sup>iv</sup> Qian M, Sheng Y, Wu M, Wang S, Zhang K. Comparison between Endoscopic Submucosal Dissection and Surgery in Patients with Early Gastric Cancer. Cancers. 2022; 14(15):3603. <https://doi.org/10.3390/cancers14153603>