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Summary

PREFERENCES RESPECT OF ENDOSCOPIC SURVEILLANCE IN PATIENTS WITH ADVANCED COLORECTAL LESIONS. VIGNETTES STUDY

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UEG Week Vienna 2024 | Poster

Colorectal

October 13, 2024

In the Polyprev randomised trial of surveillance strategies after advanced adenoma resection, patients preferred faecal occult blood surveillance over endoscopic surveillance when presented with eight decision scenarios.

KEY POINTS

- Of 521 patients who completed the questionnaire, preference rates across eight scenarios were 55.7 to 66.2 percent for faecal occult blood surveillance, 0.6 to 1.4 percent for no surveillance, with endoscopic surveillance preferences varying.
- Female gender, younger age (50 to 59 years), assignment to the colonoscopy study branch, and higher estimated colorectal cancer risk were independently associated with preference for endoscopic surveillance.
- Patients were presented with a decision support tool showing eight scenarios based on estimated colorectal cancer incidence, number of colonoscopies, and associated complications.
- The Polyprev study is a randomised clinical trial comparing faecal occult blood surveillance versus endoscopic surveillance after resection of advanced lesions in screening programmes.

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