

LOW-VOLUME VERSUS HIGH-VOLUME POLYETHYLENE GLYCOL BASED BOWEL PREPARATION FOR COLONOSCOPY IN PEOPLE RECEIVING HAEMODIALYSIS: A RANDOMIZED NON-INFERIORITY TRIAL

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Poster

Colorectal

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A randomized trial of 69 hemodialysis patients found no significant difference in bowel cleansing adequacy, adenoma detection, or safety between low-volume (2 liters) and high-volume (4 liters) polyethylene glycol bowel preparations for colonoscopy.

KEY POINTS

- Adequate bowel preparation was achieved in 69.7% of low-volume and 63.0% of high-volume groups, with no statistically significant difference ($p=0.58$) and similar mean Boston Bowel Preparation Scale scores (5.6 ± 2.4 vs 5.4 ± 2.4 , $p=0.51$).
- Adenoma detection rates were comparable at 35.0% for low-volume and 37.0% for high-volume preparations ($p=0.10$), with no difference in caecal intubation rates.
- Adverse events were mild and similar between groups, including abdominal swelling (25.9% vs 27.3%) and nausea (18.5% vs 27.3%), with no emergency dialysis sessions required and stable serum creatinine levels in both groups.
- Willingness to repeat the same preparation was high and similar in both groups (87.9% vs 85.2%, $p=0.76$), though authors note no better tolerability was observed for low-volume preparations.
- Authors conclude both preparations were equally effective and safe in this hemodialysis population, though acknowledge the small sample size and recommend larger studies to confirm findings.

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