

APPROPRIATENESS OF LOWER GASTROINTESTINAL ENDOSCOPY IN PATIENTS WITH INFLAMMATORY BOWEL DISEASE (IBD) AT A TERTIARY REFERRAL CENTER

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Poster

IBD

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A prospective study at a tertiary referral center found that 81.1% of lower gastrointestinal endoscopic procedures in 380 inflammatory bowel disease patients were appropriate according to 2023 ECCO Guidelines.

KEY POINTS

- Among 380 IBD patients (35.5% Crohn's disease, 46.3% ulcerative colitis, 15.8% ileal pouch, 2.4% unclassified), overall appropriateness was 81.1%, with variation by disease subtype: CD 85.2%, UC 83.5%, IBD-U 88.9%, and ileal pouch 63.3%.
- Appropriateness varied by procedure type, with rectosigmoidoscopy highest at 91.8%, followed by colonoscopy 83.2%, pouchoscopy 63.3%, and trans-stomal ileoscopy 33.3%.
- Of 72 inappropriate procedures, 31.9% were performed too early, 27.8% too late, 37.5% were unwarranted, and 2.8% were improper procedure types; most early procedures were physician-prescribed (78.3%) versus patient-requested (21.7%).
- Despite being classified as inappropriate, 23.6% of these procedures yielded clinically relevant conclusions including 4 cases of dysplasia, with almost 60% of these occurring in examinations performed too early or considered unwarranted.

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