

A CONTROLLED, RANDOMIZED CLINICAL TRIAL ON MANNITOL VERSUS PEG-ASC FOR BOWEL PREPARATION. EFFICACY AND SAFETY RESULTS FROM SATISFACTION STUDY

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Poster

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The SATISFACTION Phase III trial demonstrated that oral mannitol 100g/750ml was non-inferior to split-dose 2L PEG-ASC for adequate bowel cleansing in 703 elective colonoscopy patients, with significantly better patient acceptability.

KEY POINTS

- Mannitol achieved adequate bowel cleansing in 91.1% of patients compared to 95.5% with PEG-ASC, meeting non-inferiority criteria ($p=0.0095$).
- No significant differences were observed between groups for secondary efficacy endpoints including adenoma detection rate, caecal intubation rate, and time of evacuation.
- Mannitol demonstrated significantly superior patient acceptability for ease of use, taste, and willingness to use compared to PEG-ASC ($p<0.0001$ for all parameters).
- Intestinal gas concentrations (H_2 , CH_4) were similar between groups and remained well below potentially critical levels, suggesting comparable safety profiles.
- This study may be relevant for clinicians seeking bowel preparation options that balance efficacy with improved patient experience for elective colonoscopy.

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