Post-polypectomy colonoscopy surveillance: European Society of Gastrointestinal Endoscopy (ESGE) Guideline - Update 2020

Cesare Hassan

Standards and Guidelines

Endoscopy

May 14, 2020

ESGE recommends risk-stratified post-polypectomy colonoscopic surveillance intervals ranging from return to screening for low-risk findings to 3-year surveillance for higher-risk adenomas and serrated polyps.

KEY POINTS

- Patients with 1-4 adenomas less than 10mm with low grade dysplasia or serrated polyps less than 10mm without dysplasia do not require surveillance and should return to screening, or undergo colonoscopy at 10 years if organized screening is unavailable.
- Surveillance at 3 years is recommended for patients with at least one adenoma 10mm or larger or with high grade dysplasia, 5 or more adenomas, or serrated polyps 10mm or larger or with dysplasia.
- Piecemeal resection of polyps 20mm or larger requires early repeat colonoscopy at 3-6 months followed by first surveillance at 12 months to detect late recurrence.
- If no polyps requiring surveillance are found at first surveillance, a second surveillance is suggested at 5 years, after which patients can return to screening if findings remain negative.
- Detection of polyps requiring surveillance at any surveillance examination may prompt a 3-year interval for subsequent surveillance.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/e85ddf56-9360-11ed-80cb-0242ac140004

AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.