ADENOMA DETECTION RATE AND THE RISK OF POST COLONOSCOPY COLORECTAL CANCER IN THE DANISH COLORECTAL CANCER SCREENING PROGRAM

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Danish screening data from 80,374 colonoscopies demonstrates that higher adenoma detection rates are associated with significantly lower risk of post-colonoscopy colorectal cancer, with each 1 percentage point ADR increase reducing PCCRC risk by 2.5%.

KEY POINTS

- The study analyzed 80,374 colonoscopies from 20 endoscopy units in Denmark (2014-2017), identifying 4,829 screening-detected colorectal cancers and 356 post-colonoscopy colorectal cancers (PCCRC, defined as cancer occurring 6-36 months after screening).
- Endoscopy units in the highest ADR quartile (mean 60.0%) had a relative risk of PCCRC of 0.55 (95% CI 0.40-0.74, p<0.01) compared to the lowest quartile (mean 41.0%), with PCCRC proportion declining from 8.8% to 4.8%.
- Multivariable Poisson regression found females had 1.25 times higher risk of PCCRC (95% CI 1.02-1.54, p=0.03) compared to males, after adjusting for age and ADR.
- The authors conclude that ADR is a viable alternative quality indicator to PCCRC, which requires years of follow-up, and note that wide ADR variation persists in Danish screening programs as of 2021.

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