SEGMENTAL COLITIS ASSOCIATED WITH DIVERTICULOSIS (SCAD) IN A COLORECTAL CANCER SCREENING POPULATION: ENDOSCOPIC FEATURES AND ONCOLOGICAL OUTCOMES

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In a colorectal cancer screening cohort of 1518 patients, segmental colitis associated with diverticulosis (SCAD) was diagnosed in 4.5% overall and 12% of those with diverticulosis, and was associated with significantly lower adenoma detection rates compared to simple diverticulosis.

KEY POINTS

- SCAD was endoscopically diagnosed in 69 of 1518 screening colonoscopy patients (4.5% prevalence), representing approximately 12% of patients with diverticulosis.
- Patients with SCAD had a significantly lower adenoma detection rate compared to those with simple diverticulosis (31.9% vs 47.3%, p=0.018, OR 0.52, 95%CI 0.31-0.89).
- SCAD patients showed a lower but not statistically significant rate of colorectal cancer compared to simple diverticulosis (1.4% vs 6.2%, p=0.14, OR 0.22, 95%CI 0.02-1.66).
- Crescentic fold disease was the most common endoscopic pattern (69.6%), followed by mild-to-moderate UC-like (20.3%), CD-like (8.7%), and severe UC-like (1.4%) patterns.
- Use of anticoagulant/antiplatelet, anti-hypertensive, or anti-hyperglycemic drugs showed no association with SCAD onset, and most patients were successfully treated with 5-ASA without requiring surgery.

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