SURVEY EXPLORING CLINICIAN CONFIDENCE WHEN ASSESSING PATIENTS WITH LOWER GI DISORDERS OF GUT-BRAIN INTERACTION

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UEG Week Berlin 2025 | Poster

Colorectal

October 6, 2025

A cross-sectional survey of 50 UK gastroenterologists and colorectal surgeons found that while overall confidence in obtaining histories from patients with lower gastrointestinal disorders of gut-brain interaction increases with training progression, confidence remains notably low for assessing psychological factors, particularly trauma and abuse history.

KEY POINTS

- Median self-reported confidence in history taking was 7 during specialty training and 10 at post-CCT level ($p<0.0001$), but specific confidence for trauma/abuse history (median 5) and psychological comorbidities (median 6) was significantly lower than for other clinical areas ($p<0.0001$).
- The major barriers to confidence were lack of training (58%) and lack of experience (50%), followed by concerns about managing sensitive information (26%) and difficulties discussing topics with patients from different genders or social backgrounds (18%).
- Only 38% of respondents reported receiving any training in history taking for these patients, and 83% expressed desire for additional training, with 76% preferring to receive it from their training providers.
- Formal training in clinical assessment of patients with lower gastrointestinal disorders of gut-brain interaction is rare in UK and European training programs despite the complexity and prevalence of these conditions.
- This material is relevant for training program directors, gastroenterology and colorectal surgery trainees, and clinicians managing patients with irritable bowel syndrome, chronic constipation, and faecal incontinence.

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