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Summary

GASTRIC RESIDUE IN UPPER ENDOSCOPY IN PATIENTS TREATED WITH GLUCAGON-LIKE PEPTIDE-1 RECEPTOR AGONIST

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Oesophagus

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A multicenter retrospective study of 120,879 EGDs found that GLP-1 receptor agonist use is independently associated with increased gastric residue during esophagogastroduodenoscopy.

KEY POINTS

- Patients on GLP-1 receptor agonists had gastric residue in 5.6% of EGDs compared to 2.0% in non-users, a statistically significant difference across 120,879 procedures performed between 2020-2023.
- Both diabetes mellitus and GLP-1 receptor agonist use were independent risk factors for excess gastric residue in multivariate analysis, with odds ratios of 2.0 and 2.1 respectively.
- The association was observed in both diabetic patients (6.2% versus 3.0% gastric residue) and non-diabetic patients (4.2% versus 2.0%) treated with GLP-1 receptor agonists.
- The authors suggest these findings may have clinical relevance for EGD preparation protocols in GLP-1 receptor agonist users and call for prospective studies to determine optimal approaches.

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