

COLONOSCOPY IN YOUNG AND ELDERLY INDIVIDUALS: WHICH INDICATIONS ARE ASSOCIATED WITH HIGH-RISK COLORECTAL NEOPLASTIC LESIONS?

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Poster

Colorectal

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A retrospective study of 1,518 patients compared colonoscopy indications and neoplastic findings between those under and over 50 years of age, identifying constipation as significantly associated with neoplasia in younger patients.

KEY POINTS

- Constipation was significantly associated with neoplastic lesions in patients under 50 years ($p = 0.007$), while both rectal bleeding and constipation were associated with neoplasia in patients over 50 ($p < 0.001$).
- Pathological findings were more frequent in older patients (49.1% vs. 32.9%), with polyps (61.5% vs. 41.3%) and rectocolonic neoplasia (16% vs. 5%) predominating in the over-50 group.
- In patients under 50, colitis or ulcerative colitis were the most common pathological findings (47.9% vs. 11.7% in older patients).
- Diarrhea was the most common indication for colonoscopy in patients under 50 (33.3% vs. 19.3%), while constipation predominated in those over 50 (29.1% vs. 22%).
- This material is relevant for gastroenterologists considering colonoscopy indications in younger adults and assessing neoplasia risk across age groups.

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