

ARTIFICIAL INTELLIGENCE-ASSISTED COLONOSCOPY FOR ADENOMA AND POLYP DETECTION: A SYSTEMATIC REVIEW AND META-ANALYSIS OF RANDOMIZED CONTROLLED TRIALS

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Poster

Colorectal

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Computer-aided detection during colonoscopy increases adenoma detection rate by 26% compared with standard colonoscopy across all adenoma sizes, locations, and morphologies in a meta-analysis of twelve randomized controlled trials.

KEY POINTS

- Pooled adenoma detection rate was significantly higher with computer-aided detection versus standard colonoscopy (41.4% versus 33%; relative risk 1.26, 95% CI 1.18–1.35) in 11,340 patients from twelve randomized controlled trials.
- Computer-aided detection improved detection across all adenoma sizes including lesions $\leq 5\text{mm}$ (RR 1.56), 6–9mm (RR 1.24), and $\geq 10\text{mm}$ (RR 1.30), in both proximal and distal colon locations, and for both polypoid and non-polypoid morphologies.
- No significant difference was found between computer-aided detection and standard colonoscopy for detecting advanced adenomas or sessile serrated lesions.
- Colonoscopy withdrawal time was 0.34 minutes longer with computer-aided detection compared with standard colonoscopy (95% CI 0.17–0.51 minutes).
- The authors note the adenoma detection rate increase was mainly due to increased detection of diminutive adenomas and call for long-term studies to evaluate effects on interval colorectal cancer risk.

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