

BINGO - BLEEDING IN IRELAND, THE NATIONAL GASTROENTEROLOGY OUTCOME STUDY

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Poster

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A retrospective review of 16,456 GI bleeding admissions in Ireland from 2017 to 2022 found overall mortality of 3.8%, with variceal bleeds having significantly worse outcomes than non-variceal bleeds and weekend admissions associated with longer hospital stays.

KEY POINTS

- Variceal bleeds had significantly higher mortality than non-variceal bleeds (7.6% versus 3.7%), higher ICU requirements (25.4% versus 7.1%), and higher 7-day and 30-day readmission rates
- Weekend admissions were associated with increased median length of stay (4.0 days versus 3.0 days)
- Older age and ICU admission were independent predictors of mortality across all types of GI bleeding, with older age also predicting 7-day and 30-day readmissions
- Patients admitted under gastroenterology had longer average length of stay (6.9 days versus 6.3 days) but lower mortality (2.8% versus 4.1%) compared to other services
- The authors suggest variations in outcomes could be addressed by a GI bleeding care bundle and that weekend endoscopy may have value based on the longer stays for weekend admissions

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