

COMPARATIVE EFFICACY, SAFETY, AND SATISFACTION OF PROPOFOL MONOTHERAPY VERSUS COMBINED BENZODIAZEPINE-PROPOFOL SEDATION IN ENDOSCOPY

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UEG Week Berlin 2025

Poster

Colorectal

October 4, 2025

A prospective randomized trial of 207 patients found propofol monotherapy for endoscopy required higher doses than combination sedation but achieved smoother recovery and higher patient and endoscopist satisfaction.

KEY POINTS

- Both propofol monotherapy (n=101) and combination regimen (n=106) demonstrated excellent safety profiles with low complication rates that resolved spontaneously or with minimal intervention.
- Propofol monotherapy required a higher mean dose (123.84 ± 33.92 mg vs. 114.56 ± 28.17 mg, $P < 0.01$) but achieved higher uneventful recovery rates (74.3% vs. 67.9%).
- Patient satisfaction was higher with monotherapy (95.1% vs. 90.6%), as was endoscopist satisfaction (94.1% vs. 89.7%), reflecting improved patient calmness.
- Procedural outcomes including polyp detection rates and duration were comparable between the two sedation approaches.
- The trial supports propofol monotherapy as a practical option for routine endoscopic sedation in clinical practice.

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