10 YEAR REVIEW OF ENDOSCOPY UTILISATION IN PATIENTS POST ILEAL POUCH-ANAL ANASTOMOSIS SURGERY

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A 10-year review of 56 ileal pouch-anal anastomosis patients at a UK centre found poor adherence to neoplasia surveillance guidelines despite high endoscopy utilisation, with only 7% of high-risk patients receiving appropriate surveillance pouchoscopies with biopsies.

KEY POINTS

- Among 56 IPAA patients (2012-2022), 148 pouchoscopies were performed (average one every 3 years), but surveillance for neoplasia was documented as an indication in only 2 cases.
- Only 7% of high-risk patients (those with PSC, dysplasia, or neoplasia) received the appropriate number of annual surveillance pouchoscopies with biopsies, and 21% underwent no pouchoscopy despite pouch duration over 1 year.
- Low-risk patients showed better adherence, with 73% receiving appropriate surveillance pouchoscopies with biopsies, though 25% had no pouchoscopy despite pouch duration over 5 years.
- The majority of pouchoscopies (76%) were performed for symptoms such as frequency or pain rather than surveillance; biopsies were taken in 66% overall, showing no neoplasia but pouchitis/cuffitis/inflammation in 74%.
- The authors recommend routine biopsy during pouchoscopy and further research to develop robust surveillance guidelines, noting that clinician awareness of neoplasia surveillance needs appears low.

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