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Summary

ADHERENCE TO QUALITY PERFORMANCE MEASURES FOR ENDOSCOPY IN IBD: A NATIONWIDE ITALIAN SURVEY

Sergio Segato

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A 2023 survey of 178 Italian gastroenterologists found generally good adherence to IBD endoscopy quality standards, with gaps in ileal biopsies during first colonoscopy and use of lesion classification systems.

KEY POINTS

- Adherence to many quality measures was high: ileal intubation (97%), endoscopic activity indices (95%), post-operative Crohn's disease scheduling within 1 year (94%), and surveillance plan implementation (96%).
- Performance gaps were identified in ileal biopsies during first colonoscopy for suspected IBD (67% vs 80% standard) and use of Paris (70%) and mucosal pattern (60%) classifications for lesion characterization.
- Small centers (fewer than 100 IBD patients or 2 or fewer physicians) and physicians spending less than 50% of clinical time on IBD had significantly lower performance on multiple outcomes.
- Younger physicians under 35 years old showed significantly higher use of modern lesion classification systems compared to older colleagues (Paris: 89% vs 68%; Kudo: 82% vs 56%).
- The authors concluded that targeted support is needed for small centers and less-engaged practitioners to improve endoscopic quality in IBD care.

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