POOR TOLERANCE OF BOWEL PREPARATION FOR INDEX COLONOSCOPY DECREASES SURVEILLANCE RATE IN HIGH-RISK ADENOMA REMOVAL PATIENTS

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A prospective study of 186 patients with high-risk adenomas found that poor tolerance of bowel preparation for index colonoscopy and absence of a primary care physician were independent predictors of non-compliance with triennial surveillance colonoscopy.

KEY POINTS

- Sixty-two patients (33%) did not receive surveillance colonoscopy within 3 years after high-risk adenoma removal despite education recommending triennial surveillance.
- Surveillance rate was significantly lower in patients with poor bowel preparation tolerance compared to good tolerance (48% versus 74%, P less than 0.01).
- In multivariate analysis, poor bowel preparation tolerance (OR 2.45, 95% CI 1.11-5.41) and absence of primary care physician (OR 4.63, 95% CI 1.60-13.4) independently predicted non-compliance.
- The most common reason for non-compliance was unwillingness to repeat bowel preparation (27% of non-compliant patients).
- The authors conclude that providing well-tolerated bowel preparation regimens may improve surveillance colonoscopy compliance in this high-risk population.

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