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Summary

EFFICACY AND SAFETY OF CONSCIOUS SEDATION WITH MIDAZOLAM CONTINUOUS INFUSION FOR ESD PROCEDURES: A SINGLE CENTRE PROSPECTIVE STUDY

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Colorectal

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A prospective study of 101 colorectal endoscopic submucosal dissection procedures found that endoscopist-assisted conscious sedation with midazolam continuous infusion had a 4.9% discontinuation rate and 13.5% incidence of sedation side effects.

KEY POINTS

- Of 101 colorectal ESD procedures performed under midazolam continuous infusion, 5 procedures (4.9%) required conversion to anaesthesiologist-assisted deep sedation due to poor sedation response.
- Sedation side effects occurred in 13.5% of cases (13/96), predominantly bradycardia in 12 patients and hypotension in 1 patient, all managed conservatively without cerebrovascular or cardiac ischemic events.
- Sedation side effects were associated with additional intraprocedural scopolamine butyl bromide administration and patient history of respiratory disease ($p<0.05$) in univariate analysis.
- Treatment outcomes included 85.4% en bloc resection rate and 92.7% R0 resection rate, with lesions having a mean size of 37.1mm and located mostly in the rectum (96.9%).
- This material is most relevant for endoscopists and anaesthesiologists seeking data on sedation protocols for colorectal ESD procedures.

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