

Short interval repeat colonoscopy after inadequate bowel preparation is low among veterans: A single center retrospective study

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BACKGROUND

- Adenoma detection rate and interval colon cancer rates q43 associated with the quality of bowel prep
- The United States Multisociety Task Force recommends repeat colonoscopy for patients with inadequate bowel preparation within 1 year
- Little is known about the rate of repeat colonoscopy and factors associated with compliance with recommendation

OBJECTIVES

- To identify the factors associated with compliance to repeat colonoscopy at the VA Medical Center Minneapolis
- To increase adherence to the repeat colonoscopy recommendation
- To improve overall colon cancer screening and surveillance rates

MATERIAL & METHODS

- Individuals undergoing colonoscopy for colon cancer screening, surveillance or those with positive fecal immunohistochemistry test (FIT) from January 1, 2016 to October 19, 2021 were included
- Poor bowel preparation was defined based on Boston bowel preparation scale (BBPS) score or Aronchick scale

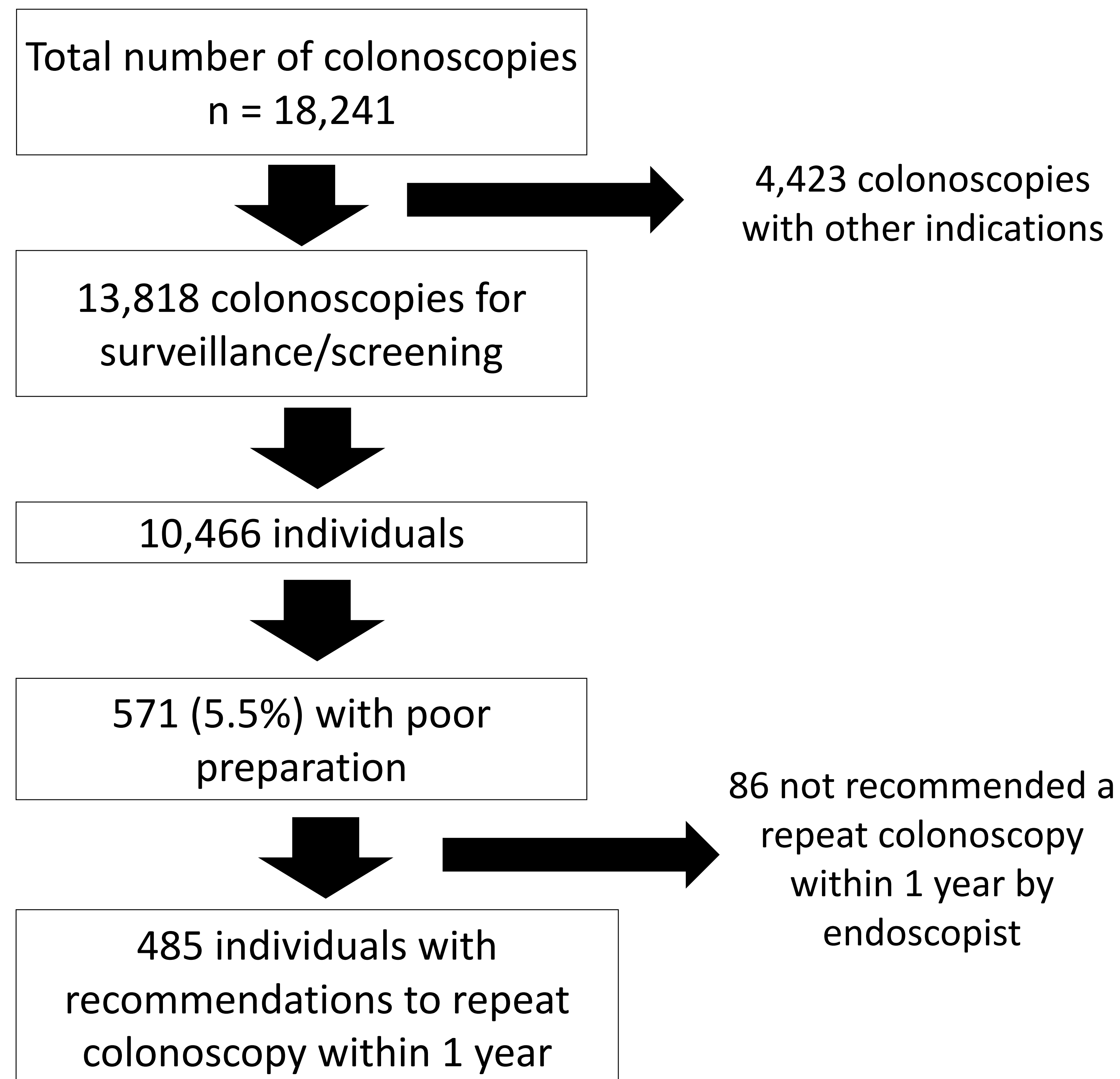
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RESULTS

Of the 18,241 colonoscopies,
485 individuals were included



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Figure 1. Dot plot of individuals and time from index colonoscopy to the next colonoscopy

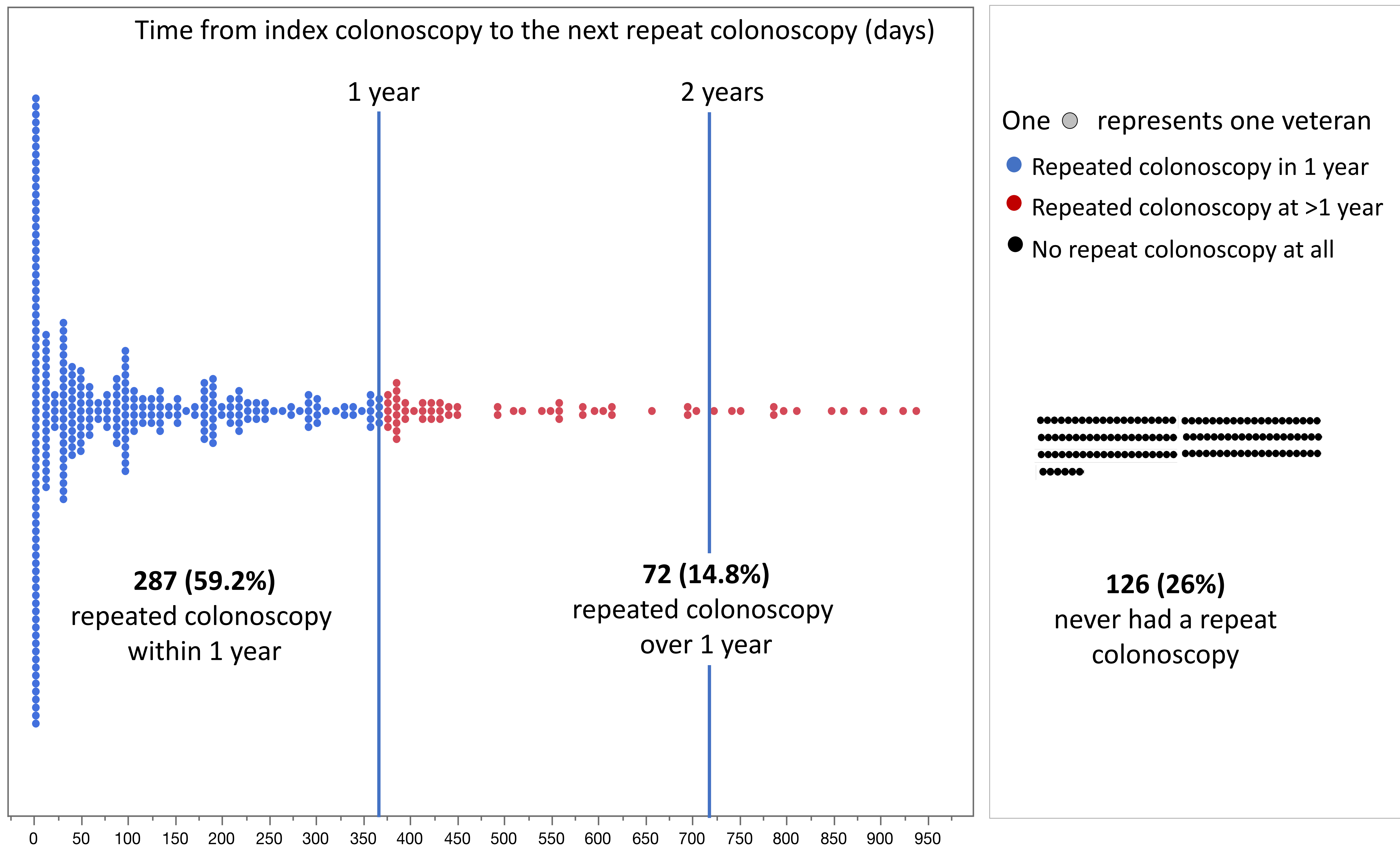
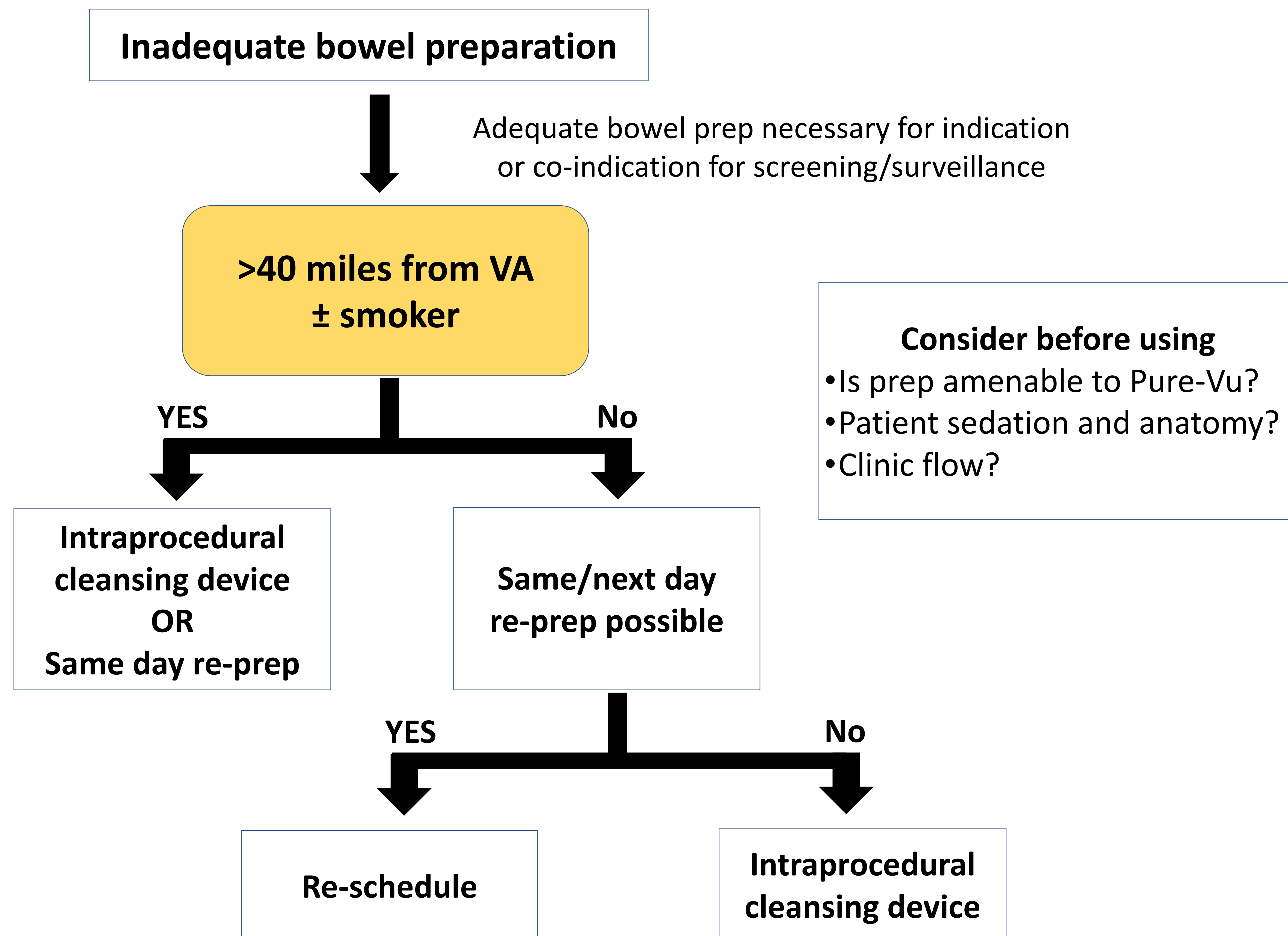


Table 1. Comparison of individuals with poor bowel preparation with and without a repeat colonoscopy within 1 year

	Colonoscopy within 1 year n=304	No colonoscopy within 1 year n=181	p-value
Age, mean ± SD	66.8±7.1	66.4±7.4	0.493
Male	289 (95.1%)	171 (94.5%)	0.776
White race	274 (90.1%)	161 (89.0%)	
Non-Hispanic	304 (100%)	180 (99.4%)	
Married	149 (51.9%)	94 (47.5%)	0.336
Distance from VA >40 miles	177 (61.7%)	101 (51.0%)	0.020*
BMI <30 kg/m ²	124 (44.0%)	89 (46.1%)	0.645
IBD	13 (4.5%)	10 (5.1%)	0.791
Current smoking	74 (25.8%)	71 (35.9%)	0.017*
Has depression, anxiety or PTSD	105 (36.6%)	74 (37.4%)	0.860
Diabetes	108 (37.6%)	74 (37.4%)	0.858
Medications			
Opioid	18 (6.3%)	13 (6.6%)	0.897
Tricyclic antidepressant	10 (3.5%)	4 (2.0%)	0.344
Anticoagulation	17 (5.9%)	8 (4.0%)	0.357
Antiplatelet excluding aspirin	8 (2.8%)	2 (1.0%)	0.176

Our current protocol for intraprocedural cleansing based on the study result



Key Messages

- The rate of poor bowel preparation was **5.5%** in patients undergoing colonoscopy for colon cancer prevention
- **40.8%** of patients did not undergo colonoscopy within 1-year after inadequate bowel prep with **26% never** undergoing follow-up colonoscopy
- **Distance** from VA and **smoking** status predict follow-up
- Additional efforts are needed to ensure that patients with inadequate bowel preparation return for timely repeat colonoscopy