

PTU-011 **MANAGEMENT OF LARGE POLYPS WITHIN THE  
SOLENT BOWEL CANCER SCREENING PROGRAMME**

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**Introduction** The introduction of the bowel cancer screening programme has resulted in a rise in the number of large polyps being encountered during endoscopy. The exact frequency and management of these polyps remains unclear. This study aims to assess the incidence of large polyps and their management in the BCSP and to extrapolate this to the national scenario within the programme.

**Methods** The bowel cancer screening database was interrogated to identify all cases over the last 3 years where lesions greater than 2 cm were identified. In each case the polyp morphology and histology was noted. The case files were retrieved and the treatment given to the patient recorded.

**Results** The Solent BCSP covers a catchment population of 763 000. In total 1573 colonoscopies were performed over a 3 year period.

**Polyp burden** There were 2454 polyps in total (1072 per million per annum). 193 polyps >2 cm were seen during this period. This amounts to 84 per million per annum and represents 7.9% of the total polyp burden. 122/193 were pedunculated polyps (53 per million per annum) and 71/193 were flat polyps >2 cm (31 per million per annum) representing 2.9% of all polyps. It is flat lesions >3 cm which we believe are very challenging. The frequency of these was 32/193 (14 per million per annum), just 1.3% of the polyps encountered.

**Polyp cancers** The overall risk of cancer in polyps >2 cm was 13%. Size did not correlate to risk of malignancy.

**Polyp management** 24/193 polyps were not resected endoscopically. 17 were referred to surgery due to suspected malignancy and were found to have cancer at surgery. 7 benign adenomas were sent to surgery. 4 benign polyps were referred to surgery due to technical inability of the endoscopist, 1 due to coexisting cancer, 1 due to co-existing ulcerative colitis and 1 due to patient choice.

**Conclusion** (1) The majority of polyps in the BCSP are small (2) Flat adenomas >2 cm are infrequent and those >3 cm are rare, representing 1.3% of the total polyp burden (3) The management of most of the large lesions in this series was endoscopic, due in part to a strong local EMR service within the Solent area (4) Our data shows that the number of patients with large and flat lesions in the BCS programme is low and a good outcome can be achieved in a specialist centre.

**Competing interests** None.

**Keywords** Bowel Cancer Screening, cancer, polyp, screening.