

OC-080

POLYPECTOMY AT COLONOSCOPY AND SIGMOIDOSCOPY IN ENGLAND: A REVIEW OF NATIONAL DATA BETWEEN 1997 AND 2007

doi:10.1136/gut.2011.239301.80

A M Almoudaris,^{1,*} S Gupta,² A Bottle,³ P Aylin,³ J E East,⁴ S Thoms-Gibson,² O D Faiz¹ ¹Department of Surgery, Imperial College London, St. Mary's Hospital, London, UK; ²Endoscopy, Wolfson Unit for Endoscopy, St. Mark's Hospital, Harrow, UK; ³Dr Foster Unit, Imperial College London, London, UK; ⁴Gastroenterology, John Radcliffe Hospital, Oxford, UK

Introduction Currently, there is no national endoscopic database in England. Information regarding the volume of therapeutic endoscopic procedures such as polypectomy is obtained mainly from small prospective studies. This article examines the Hospital Episode Statistics (HES) database to assess the number of patients that have undergone a therapeutic polypectomy for a diagnosis of a benign colorectal polyp over a 10-year period. We also analyse 28-day re-admission and 30-day mortality rates post procedure across 174 English National Health Service (NHS) units.

Methods All elective patients having undergone a therapeutic polypectomy for a benign colorectal polyp between 1 Jan 1997 and 31 December 2007 in English NHS units were identified from HES after cleaning and formatting the dataset. Trends in rates of colonoscopies and flexible sigmoidoscopies were evaluated as well as 28-day re-admission and mortality rates over time. The reliability of HES data has previously been demonstrated in general surgical and medical patient cohorts

Results The HES dataset reports that, 334,753 polypectomy procedures were performed on 286,204 patients in English NHS Trusts over the 10-year period. Of these, 233,119 (69.6%) were colonoscopic and 101,634 (30.4%) were via flexible sigmoidoscopy. Over this period a 55.2% increase in the total number of endoscopic polypectomy procedures were performed (from

Table 1 OC-080

YEAR	Readmission rate (%)	Mortality Rate (%)	Number of procedures
1997	2.188	0.3	20289
1998	2.19	0.33	27262
2000	2.119	0.24	33505
2001	2.311	0.09	33235
2003	2.328	0.18	38021
2004	2.204	0.25	28398
2005	2.345	0.08	25881
2006	2.479	0.1	28927
2007	2.454	0.06	31503

20,289 in 1997 to 31,503 in 2007). Over the study years, the unadjusted average readmission (range 2.08% > 2.47%) and mortality rates (range -0.33% > 0.63%) overall were not significantly different ($p = 0.440$, both).

Conclusion This analysis is the first to report national lower GI polypectomy numbers. It appears to demonstrate that patients undergoing endoscopic polypectomy rose by 55% from 1997 to 2007. Improved coding and a genuine increase in polypectomy workload may underlie these findings. Given the volumes of polypectomies being undertaken, and that polypectomy accounts for most of the procedure related risk with lower GI endoscopy, this may strengthen the case for improved training and accreditation in polypectomy.

Competing interests None.

Keywords colonoscopy, HES, national data, polypectomy, sigmoidoscopy.