SURGERY FOR BENIGN COLORECTAL POLYPS IN ENGLAND – TRENDS AND OUTCOMES FROM 1997 TO 2007

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Introduction Currently, there is no national evaluation of the potential impact that advances in endoscopic techniques and therapy have had in England. 1 This study examines the Hospital Episode Statistics (HES) database to assess the trend in patients that have required a surgical polypectomy after at least one attempted therapeutic endoscopy for a diagnosis of a benign colorectal polyp over a 10-year period.

Methods All elective patients having undergone a surgical procedure for a benign colorectal polyp between 1 January 1997 and 31 December 2007 in English NHS units were identified from HES after cleaning and formatting the dataset.

Results Over the 10-year period, 334,753 polypectomy procedures were performed in 174 English NHS Trusts. Of these, 18,716 (5.59%) required a surgical procedure for excision of a benign polyp. Over the study period, there was no significant difference in the number of surgical procedures for the removal of benign polyposis performed annually (1560 in 1997 to 1601 in 2007) (p < 0.433). Trends in 28-day readmission (6.15% > 11.36%), length of stay (11.1–14.26 days) and mortality rates (1.11% > 3.21%) did not change significantly over the study years (p = 0.440, 0.232, 0.242, respectively).

Conclusion This analysis is the first to examine the HES database for national trends in surgical polypectomy for benign polyposis. Nationally, there was no annual difference in the numbers of patients requiring surgical procedures for the removal of benign polyposis. This suggests that a small but consistent proportion of all benign polyposis has required surgical removal despite advancements in endoscopic techniques or that the uptake of such techniques has been limited, despite regional centres of excellence.

Competing interests None.

Keywords benign colorectal polyposis, surgery, trends.

REFERENCE