

中文題目：無痛大腸鏡是否會改善腸胃科受訓醫師的腺瘤偵測率？

英文題目：If sedative colonoscopy can improve adenoma detection rate of gastroenterology fellowship ?

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Background : Adenoma detection rate (ADR) is used for evaluation the colonoscopy quality. Many factors have been shown to be associated with ADR. Such as cecal intubation rate (CIR), bowel preparation and withdrawal time at least six minutes. However, whether the moderate sedation or the more longer withdrawal time are factors that can influence adenoma detection rate remain controversial

Aims : We aimed to evaluate the factors that can influence adenoma detection rate during colonoscopy. Including moderate conscious sedation and the more longer withdrawal time.

Methods : Patients who underwent colonoscopy from November 1, 2018 to April 30, 2019 and received examination by gastroenterology fellowship doctors were enrolled into this retrospective study. Patients with poor colon preparation and failure to reach the cecum were excluded.

Result : A total of three gastroenterology fellowship doctors and total 482 patients were included in this study. Fellow A : 165 patients, Fellow B : 168 patients and Fellow C : 149 patients.

Compared with normal colonoscopy and conscious sedation colonoscopy. No significant difference about the adenoma detection rate. We found fellow B had the lowest adenoma detection rate (23.2%) However, he had the longest withdrawal time. (12.44 minutes) We found that the more withdrawal time can't improve adenoma detection rate during colonoscopy.

Conclusions : There was no significant difference about the adenoma detection rate compared with normal colonoscopy and conscious sedation colonoscopy performed by fellowship doctors. Furthermore, prolong withdrawal time didn't have more adenoma detection rate during colonoscopy.