



AB173. An audit of gastric polyp evaluation during oesophagogastroduodenoscopy in a high-volume unit

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Background: With the increasing use of endoscopy visually discernable abnormalities of the gastrointestinal tract, including polyps, are being encountered more often. Whilst there have been clear guidelines relating to polyp management in the colon for some time the management of gastric polyps remains controversial. The vast majority of gastric polyps have little or no malignant potential however it is often not possible to discern histological subtypes based solely on endoscopic appearance. As such in 2017 the British Society of Gastroenterology, in their first position paper on quality standards in oesophagogastroduodenoscopy (OGD), recommended that the presence of gastric polyps should be

recorded, with the number, size, location and morphology described, and representative biopsies taken.

Methods: To assess our units approach to gastric polyps in light of these new guidelines. We retrospectively reviewed all elective OGD reports from January 1st to March 31st 2019. Where gastric polyps were identified we assessed if their number, size, location and morphology were described and if representative biopsies were taken.

Results: A total of 303 OGDs were reviewed. Males comprised 54.46% of the cohort with the average age being 58.8 years. The most common indication was “abdominal pain” (18.8%), followed by dysphagia (14.2%) and anaemia (12.9%). Gastric polyps were identified in 22 of the OGDs (7.3%). Polyp size was not reported in any case whilst location was reported in all cases. Morphology was described in 1 OGD and no representative biopsies were taken in any case.

Conclusions: There remains scope for improvement in our units management of gastric polyps.

Keywords: Oesophagogastroduodenoscopy; gastric polyp; endoscopy

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