## AB142. SOH21AS077. Implementation of the new British Society of Gastroenterology (BSG) 2020 Post-polypectomy Surveillance Guideline is associated with cost savings and capacity improvements

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**Background:** Low-risk adenomas (LRAs) do not increase a patient's risk of developing colorectal cancer. In line with this, recently published BSG post polypectomy surveillance guidelines recommend patients with LRAs participate in Bowel Cancer Screening programmes when eligible rather than colonoscopic surveillance. Furthermore, no surveillance is recommended in patients over 75 years or with <50% 5-year survival.

Methods: Retrospective study analyzing endoscopy database records from Jan 1st, 2018 to Jan 1st, 2020. Life expectancy was estimated as <10 years where Charlson comorbidity Index (CCI) was ≥3. Need for repeat/surveillance colonoscopy requirement rates were calculated by application of the 2010 and 2020 BSG guideline. Cost savings were calculated using the NHS 2018/2019 tariff for diagnostic colonoscopy and an estimate of histology costs [assuming 30% adenoma detection rate (ADR)].

**Results:** A total of 1,561 procedures were analyzed, accounting for 1,495 patients. Cecal intubation, adequate bowel preparation rate and polyp detection rate were

98.1%, 86% and 60.5%, respectively. Of patients under colonoscopic surveillance, 10.8% were over 75 years old and 21.3% had a limited life expectancy (CCI ≥3) at time of colonoscopy. Using the new BSG guideline, the need for follow-up colonoscopy was reduced from 66% to 33.9% with a cost saving of approximately 119,182 euro.

**Conclusions:** Implementation of the new BSG guideline generates significant cost savings and additional capacity. This is particularly helpful where endoscopy unit capacity has been affected by the COVID-19 pandemic.

Keywords: Colonoscopy; guidelines; surveillance; polyp

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## **Footnote**

*Conflicts of Interest*: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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