



An Appropriately Triaged Functional GI Clinic as an Alternative to Endoscopy in the Post COVID-19 Era?

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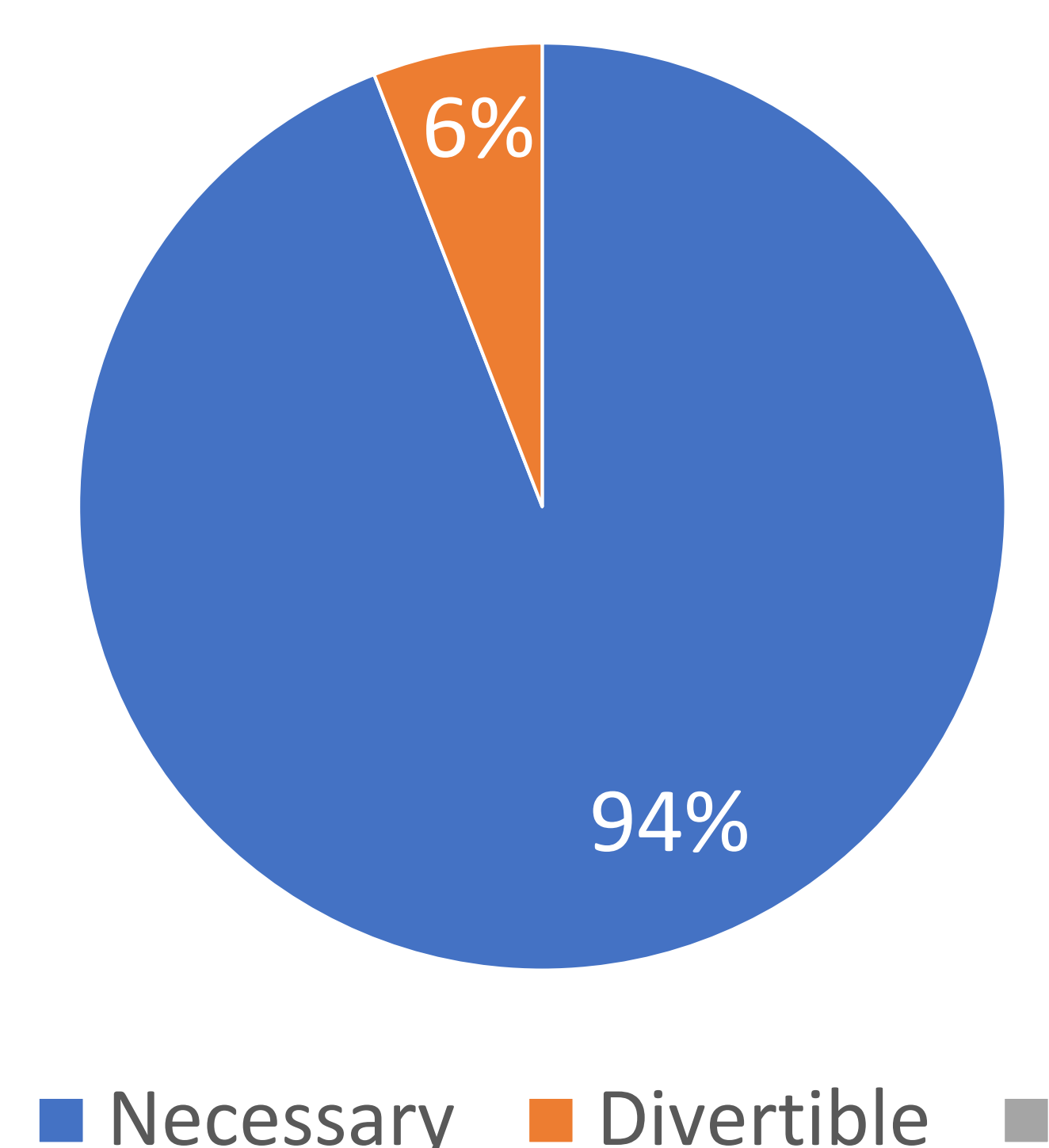
Introduction

COVID 19 has substantially affected endoscopy waiting lists. At present alternative methods of patient assessment rather than direct endoscopy are being considered for suitable patients. A direct access IBS clinic with dietetic input would represent a viable pathway for young patients meeting criteria for IBS symptoms.

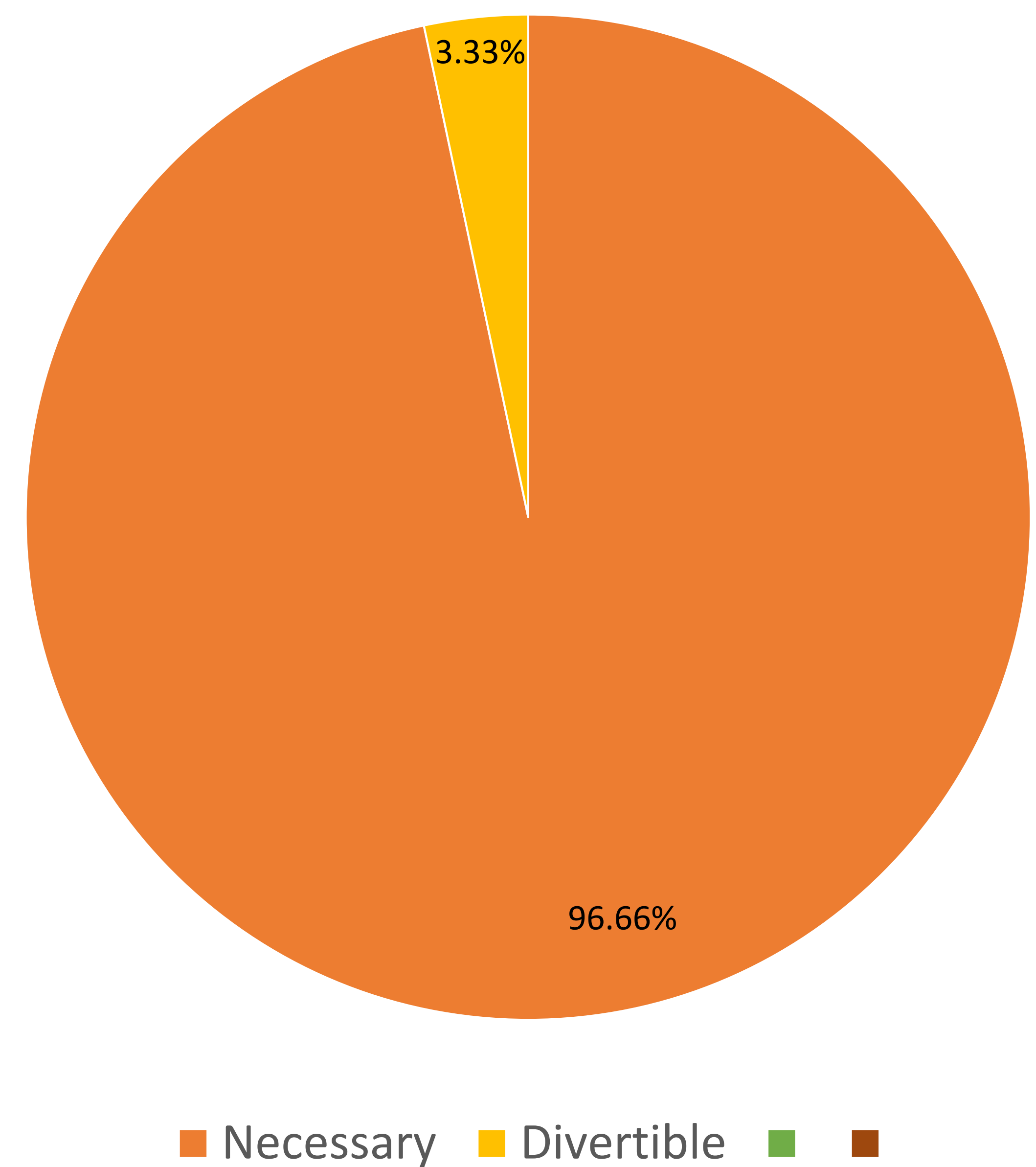
Methods

The aim of this project was to evaluate compliance with colonoscopy triage guidelines for patients aged under 45 with a view to gauging a patient cohort suitable for diversion to a functional GI clinic with dietetic support. A retrospective review was completed of all patients aged under 45 who attended for colonoscopy over a 2 month period in the pre-COVID-19 era, Jan-Feb 2020, looking for compliance with local colonoscopy triage guidelines.

Total Colonoscopies under age 45



Sigmoidoscopies overall



Results

A total of 598 colonoscopies and 239 sigmoidoscopies were completed during this time frame, 101 and 94 respectively for patients aged under 45. 6.05% of colonoscopies and 8.45% of sigmoidoscopies were for IBS symptoms and fell outside of current triage guidelines. Extrapolating the data to one year, this would save 3.33% of sigmoidoscopies and 1% of colonoscopies overall.

Discussion

A certain cohort of adequately triaged patients aged under 45 with IBS symptoms could be diverted to a dedicated functional GI clinic saving endoscopy slots.