

# Implementation of Standardized Endoscopic Scoring Systems in Patients with Inflammatory Bowel Disease

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## Background

- Endoscopic scoring systems are an established mechanism for standardized assessment of disease activity in Inflammatory Bowel Disease (IBD) with disease specific systems for Crohn's disease (CD) and ulcerative colitis (UC)<sup>1-4</sup>.
- Standardizing scoring facilitates transition of care between endoscopist and treating gastroenterologist and allows for participation of patients in clinical trials<sup>1,7</sup>.
- Despite expert opinion regarding their use in endoscopy, implementation at our institution is suboptimal.

## Aim

- We sought to increase the utilization of standardized endoscopic reporting systems (SES-CD and Mayo Score) for patients with IBD undergoing colonoscopy to 70% at our institution by February 2022.

## Methods

- A query was opened using our institution's endoscopy software, Provation.
- Inclusion criteria were patients with documented or suspected IBD undergoing colonoscopy for the following indications: assessment of disease activity, response to therapy, screening for high-risk dysplasia, screening for suspected IBD.
- This data was then analyzed for inclusion of either the SES-CD for CD or Mayo Score for UC in the final endoscopy report.
- Our intervention included departmental education regarding implementation of standardized IBD endoscopy templates and was implemented 9/1/2021.
- Pre- and post-intervention data was collected.

## Results

- From August 2020 – February 2022, 90 Crohn's Disease endoscopies were performed.
- 61 were performed pre-intervention and 29 following intervention.
- Prior to the intervention, 14.8% (9/61) of the colonoscopy reports included the SES-CD score, and following the intervention, 44.8% (13/29) (p = 0.002).
- Over this same time period, 160 UC endoscopies were performed
- 121 were performed pre-intervention and 39 following intervention.
- Prior to the intervention, 46.3% (56/121) of the colonoscopy reports included the Mayo score, and following the intervention, 84.6% (33/39) (p = 0.00003).

## Discussion

- Implementing a standardized endoscopic scoring system for IBD patients may help alleviate some of the subjective reporting variance seen with differing endoscopists<sup>1,5,6</sup>.
- We plan to identify providers who individually may not be meeting our proposed benchmarks and provide further education into the rationale behind adopting this intervention institutionally.
- We are also considering implementation of standardized colonoscopy templates for incoming first-year Gastroenterology fellows to use throughout their training to make standardized reporting more routine.

## Tables

SES/Total screened	%
22	
90	
0.244444444	24.44444

*Pre-intervention: SES/Total Colonoscopies	%	*Post-intervention: SES/Total Colonoscopies	%
9		13	
61		29	
0.147540984	14.75409836	0.448275862	44.82758621

Mayo Score/Total Screened	%
89	
160	
0.55625	55.625

*Pre-intervention: Mayo/Total Colonoscopies	%	*Post-intervention: Mayo/Total Colonoscopies	%
56		33	
121		39	
0.462809917	46.28099174	0.846153846	84.61538462

## References

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