## Adenoma Positivity Rate in a Young Urban Patient Population Undergoing Colonoscopy

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## Introduction

> There is a rise in colorectal cancer in younger patients <45 years of age.
> Limited data on prevalence of colorectal neoplasia in this population
> Our objective was to evaluate the Adenoma Positivity Rate (APR) for patients 40-49 years-old undergoing colonoscopy, irrespective of indication.

## Methods

$>$ Retrospective endoscopy database review for all patients ages 40-49 who underwent colonoscopy at our institution between 2018 and 2021.
> Colonoscopies were excluded:
> Inadequate bowel preparation
> Pathology revealed adenocarcinoma

## Results

A total of 621 colonoscopies were performed; 571 met inclusion criteria.
Overall APR was $31.2 \%$, with no statistically significant difference between patients ages 40-44 and 4549 years (34.9\% and 30.3\%, $\mathrm{p}=0.358$ ).


APR with Age


## Results

> Indication for colonoscopy showed numeric differences that were not statistically significant, with the highest APR found in patients undergoing surveillance colonoscopy for a history of colon polyps compared to average-risk screening ( $42.6 \%$ vs $28.2 \%, p=0.167$ ).

## Conclusion

$>$ Our analysis of a relatively young population undergoing colonoscopy in an urban setting revealed an APR above $30 \%$ with no difference among patients 40-44 and 45-49 years.
> Results are skewed due to a quarter of the patients undergoing high-risk or surveillance colonoscopy.
> Further research can help identify whether this similar adenoma burden translates to higher CRC rates for younger patients.

