Incidence of Follow up Colonoscopy after Acute Diverticulitis: A Single Center Experience

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Background

• Acute diverticulitis (AD) is the third most common inpatient gastrointestinal (GI) diagnosis in the United States.

- Guidelines recommend a follow-up colonoscopy in complicated diverticulitis and after first episode of uncomplicated AD to rule out underlying adenoma and colorectal cancer.
- We conducted a retrospective study to assess our institution's adherence to guidelines by determining the incidence of follow-up colonoscopies in patients with AD.

Methods

- We conducted a retrospective chart review of all adult patients presenting to Allegheny Health Network with AD.
- Demographic details, imaging, treatment, discharge, and follow-up data were collected.
- Chi-square test or Fisher's exact test were used for categorical variables.
- P-value < 0.05 was considered statistically significant.

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Figure showing referral to colonoscopy in complicated and uncomplicated diverticulitis (upper) Teaching, Private & Surgical Teams (lower)

- (95% CI:1.93-6.59).



Allegheny Health Network

Results

• We included 489 patients with age 64.06±14.82 years, comprising 222/489 (45.03%) males in our study.

• Left-sided diverticulitis was most common 459/489 (93.9%), followed by right sided 20/489 (4.1%) and bilateral 6/489 (1.2%).

• 272/485 (56.1%) had complicated diverticulitis.

• Follow-up colonoscopy was done in 82/213 (38.5%) and 109/272 (51.1%) in uncomplicated and complicated diverticulitis respectively.

Colonoscopy was performed in 50/213 (23.5%) and 73/272 (26.8%) in uncomplicated and complicated diverticulitis groups respectively for screening of colorectal cancer after the episode of diverticulitis.

• Further analysis showed that odds of GI follow-up were 3.6 times greater for patients with a PCP follow-up than without a PCP follow-up

• Patients were 1.7 times more likely to have a colonoscopy follow-up if they had a PCP follow-up (95% CI:1.18-2.50).

Conclusions

Our study shows low adherence to guidelines for follow-up colonoscopy after the episode of acute diverticulitis especially among private hospitalists and surgical teams.

• This allows for the opportunity to further educate medicine providers, which can improve early diagnostic rates of adenoma and colorectal carcinoma in this population.