

INTRODUCTION

Few data are available on the prevalence of preneoplastic and neoplastic colonic lesions in patients with liver cirrhosis. The aim of this study was to analyze the adenoma detection rate and to assess the quality of colonoscopy bowel cleansing in patients with liver cirrhosis.

METHODS

We conducted a retrospective monocentric study in a cohort of cirrhotic patients who underwent colonoscopy between January 2012 and May 2022. The prevalence of colonic lesions, the adequacy of bowel preparation and the patient's characteristics were assessed.

CONCLUSIONS

- ✓ Cirrhotic patients have worse bowel preparation scores and cecal intubation rates compared to the general population.
- ✓ Given the importance of colorectal polyp detection, alternative bowel cleansing protocols are needed for cirrhotic patients.

RESULTS

A total of 125 patients were included, most of them male (80.8%), with a median age of 61 years old (IQR 55-68).

	Patients n=125
Underlying liver disease	
Alcohol	76 (60.8%)
HCV infection	16 (12.8%)
MAFLD	11(8.8%)
HBV infection	6 (4.8%)
Autoimmune hepatitis	5 (4.0%)
Child-Pugh classification	
Class A	71 (56.8%)
Class B	39 (31.2%)
Class C	15 (12.0%)

	Colonoscopies n=173
Reasons for endoscopy	
Colorectal cancer screening	83 (48.0%)
Anemia	45 (26.0%)
Gastrointestinal bleeding	20 (11.6%)
Pre-transplant study	16 (9.2%)
Constitucional syndrome	4 (2.3%)
Diarrhea	4 (2.3%)
Abdominal pain	1 (0.6%)
Cecal intubation rate	152 (87.9%)
Poor bowel preparation	64 (37.0%)

	Colonoscopies n=173
Adenomatous polyps	
low-grade dysplasia	44 (25.4%)
high-grade dysplasia	2 (1.2%)
Adenocarcinoma	3 (1.7%)
Rectal varices	26 (15.0%)
Colonic telangiectasia	30 (17.3%)
Diverticula	21 (12.1%)

Neither Child-Pugh grade (p=9.622), gender (p=0.169) or advanced age (p=0.292) affected adenoma detection rates.

No significant differences were observed in the findings of adenomas between different chronic liver diseases.