Adenoma Detection Rates for 45- to 49-Year-Old Population in a Nonacademic Center in the Dominican Republic



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INTRODUCTION	RESULTS			DISCUSSION	
 An increase in incidence and mortality associated with early-age onset colorectal cancer (CRC) prompted the American Cancer Society to recommend the beginning of CRC screening at age 45. This has prompted studies to calculate adenoma detection rate (ADR) between the age 45-49 to support these new guidelines, specially since there has been an increase in colorectal cancer in this age group. There is little information of the ADR in this age group, for this reason we created this study to see if its feasible to use the same quality measures as we do for patients 50 or older. 	 The ADR in the group aged 45-49 was 36.3%, while the ADR in the group aged ≥ 50 was 57%. The PDR in the group aged 45-49 was 54.7%, while PDR in the group aged ≥ 50 was 71.7%. The APC in patients aged 45-49 was 0.59, while APC in patients aged ≥ 50 was 1.1. Finally, the APP in patients aged 45-49 was 1.62, while APP in patients ≥ 50 was 1.87. 		 The ADR was lower in the 45-49 age group with a 36.3%, compared to the 57% ADR in the 50 or older age group. The same could be said when it comes to PDR, this is related to the fact that polyps are more prevalent with increasing age. This data supports the new guidelines, as the adenoma detection rates in the 45-49 age group were above the current standards for ADR in patients ≥ 50. Further studies will be needed to forecast the full impact of the new screening guidelines on the ADR, however, the need to lower the current ADR threshold would be unlikely. Then again, further studies are still needed to learn how 		group. s is related creasing noma e the impact of er, the e unlikely.
METHODS			these r	new standards will impact not only ADR but on and prevention in the following years.	
 A prospective observational study was conducted on 924 patients who underwent colonoscopies from January 2021 through June 10th, 2022 in a non-academic center The procedures were performed by 2 endoscopists. The patients were divided into two groups, the first one including all patients aged 45-49 undergoing screening colonoscopies, and the other all patients aged ≥ 50 undergoing screening colonoscopies. The primary outcome of this study was the adenoma detection rate (ADR). Secondary outcomes included polyp detection rate (PDR), adenomas per colonoscopy (APC), and 		Patients between 4 old			
	ADR	36.3%		57%	
	PDR	54.7%		71.1%	
	APC	0.59		1.1	
	АРР	1.62			