Terminal Ileum Intubation During Screening Colonoscopy: Do I Really Need to Go That Far?

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Background

- The value of routine intubation of the terminal ileum (TI) in asymptomatic patients undergoing screening colonoscopy is unclear
- Cecal intubation rate is included among the quality parameters for colonoscopy, however terminal ileum intubation is not a quality parameter
- There exists conflicting data and lack of standardized guidelines concerning yield of TI intubation in this population

Aim and Hypothesis

- Our aim was to assess and analyze terminal ileum intubation in screening colonoscopies and determine the pathological yield and clinical significance
- We hypothesized that the rate of pathological abnormalities would be less than 1% and not clinically relevant

Methods

- Screening colonoscopies between January 2016 – June 2017 were included using a Prospectively maintained colonoscopy database
- Demographic variables, examination times, bowel preparation quality, gross examination findings, pathology results were collected
- Univariate analyses performed, p-values < 0.05 were considered statistically significant

Table . Univariate analysis of quality metrics

Factor	No TI Intubation (N=19,741)	TI Intubation (N=5,752)	p-value
Gender (female)	10,327 (52.7)	3,013 (52.6)	0.85
Age	60±8.5	58.7±8.1	**<0.001**
Withdrawal time (no adenoma)	9 [7,12]	10 [7,13]	**<0.001**
Bowel preparation Quality (Excellent/Good)	18,781 (94.8)	5,667 (98.5)	**<0.001**

Statistics presented as Mean ± SD, Median [P25, P75], Median (min, max) or N (column %)

Results

- 25,493 consecutive screening colonoscopies
- Mean age = 59.7 ± 8.4, 52.7% female
- **5,752 (22.5%)** scopes had TI intubation, 100/5,752 had gross TI examination findings and biopsied
- 40 had biopsy proven findings, 38 had acute acute/chronic enteritis (No IBD on short-term follow-up),1 had Inflammatory polyp,1 had well-differentiated neuroendocrine tumor
- **Gross pathological findings: 0.16%**
- **Biopsy proven pathology: 0.6%**
- **Clinically relevant pathology: 0.017%**
- TI intubation patients were younger and had better bowel preparation quality

Conclusion

- **Findings of our study support the conclusion that routine terminal ileum intubation in asymptomatic patients undergoing screening colonoscopy is unwarranted**
- Including terminal ileum intubation as a quality parameter for screening colonoscopy is unjustified based on our results