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Abstract
This study was carried out from Jan ‘12-Dec ‘12 to assess current practice in Kerry General Hospital against the age related indications for colonoscopies. A total of 1474 colonoscopies were performed, 1177 (79.9%) were diagnostic and 297 (20.1%) were therapeutic, patients were divided into 4 age groups under 75, 75-80, 81-85, >85. The trend analysis revealed an increase in diagnostic colonoscopies and decrease in therapeutic colonoscopies with age. 664 (45.04%) of colonoscopies were reported normal which made up the majority of the total diagnoses. 1330 (90.2%) of colonoscopies occurred without any complications. Main complications were patient discomfort being the highest, present in 112 (7.6%) of patients, and lowest being urticaria around the IV site present in 1 (0.1%) of the cases. Patient discomfort was highest in younger patients as evidenced by 98 cases aged <75, followed by 11 cases aged 75-80, 2 cases aged 81-85 and 1 case aged >86. Highest percentage of poor tolerance was found in 14 (1.1%) of total patients <75, 1 (0.8%) of total patients aged 75-80, 1 (0.8%) of total patients in age group 81-85 and none (0%) in age group >86. We have established the safety of colonoscopy, low rate of complications and a better tolerance in the elderly from this study, however, its utility, especially in presence of other comorbidities in elderly is questionable.

Introduction
The tolerance and appropriateness of Colonoscopies has always been of great interest to Gastroenterologists. Various recommendations exist however no particular guidelines are available that address the issues specifically. The aim of this study was to determine the same and attempt to develop an appropriate pathway of referral for elderly patients requiring colonoscopy.

Methods
We retrospectively analysed the data of colonoscopies performed at KGH from Jan ‘12-Dec ‘12. Data was divided 4 major age groups, <75, 76-80, 81-85, >86. The factors analysed were Gender, Indications, Type (Diagnostic/Therapeutic), Age Categories against Depth of Insertion, Diagnosis and Complications.

Results
A total of 1474 colonoscopies were performed, of which 728 (49.39%) were males and 746 (50.61%) were females, 1253 (85.01%) were aged<75, 133 (9.23%) were aged 75-80, 60 (4.07%) were aged 81-85, and 28 (1.90%) were of age >86, 1177 (79.9%) of colonoscopies were diagnostic and 297 (20.1%) were therapeutic. In age group<75 998 (78.9%) were diagnostic and 49 (3.7%) were therapeutic. In age group 75-80 465 (35.7%) were diagnostic and 112 (8.6%) were therapeutic. In age group 81-85 53 (88.3%) were Diagnostic and 7 (11.7%) were Therapeutic. In age group >86 25 (89.3%) were Diagnostic and 3 (10.7%) were therapeutic colonoscopies. 664 (45.0%) of colonoscopies were reported as normal; other diagnoses in decreasing order were Diverticulosis 210 (14.2%), Hemorrhoids 114 (7.7%), Single Poly 54 (3.6%), Multiple Polyps 20 (1.3%), Diverticulosis with Hemorrhoids 17 (1.1%), Diverticulosis with polyps 14 (0.95%), Malignant tumour 12 (0.81%). Miscellaneous findings which could not be categorized as any of above made up a total of 25.03%.

Discussion
From these results we can establish the safety, low complication rate and good tolerance of Colonoscopy in the elderly. However the incidence of therapeutic colonoscopies can be seen to reduce with age. U.S. preventive services task force recommends screening for cancer using faecal occult blood, sigmoidoscopy or colonoscopy in adults from 50 years. In this study, however, its utility, especially in presence of other comorbidities in elderly is questionable.

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References
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2. CIA World Factbook. Life expectancy at birth: total population: 80.44 years
male: 78.18 years female: 82.83 years (2013 est.) Source: CIA World Factbook — Unless otherwise noted, information in this page is accurate as of December 6, 2013

Tolerance of Colonoscopy and Questioning its Utility in the Elderly Population