

Is sedation/analgesia needed for colonoscopy screening?

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Colonoscopy: National differences

- France 1999: 83% general anaesthesia
- U.K. 2004: 95% sedated
- Finland 1999, Norway 2004: >90% requiring **no** sedation
- Ristikankare et al, Finland 1999:
Midazolam/placebo/no cannula: ***”Routine sedation does not markedly facilitate coecal intubation or patient tolerance”***
- USA 1999: Problems even recruiting patients for a similar study.

**Bowles et al: A prospective study of colonoscopy practice in UK. Gut
2004;53:277-83**

- **17% of 234 colonoscopists had received supervised training during first 100 procedures**
- **39% had attended a formal training course**
- **Conclusion:**
- **All colonoscopists should be encouraged to develop a plan for improving practice**



Sedation and perforation

	No. of colonoscopies	No. of perforations
Centres using routine sedation	14,280	13(0.09%)
Centres not using sedation	3,220	1(0.03%)

Hall. Br J Surg 1991;78:542-4

12 perforations/9200 colonoscopies	Diagnostic (7300)	8
	Therapeutic (1900)	4

Bowles et al. GUT 2004;53:277-83



Gastronet

Norwegian survey, 11 hospitals, 2635 colonoscopies

Hospital	Percent sedated	Percent coecal intubation
A	62	100
B	53	93
C	22	97
D	43	92
E	4	96
F	34	88
G	50	93
H	93	91
I	64	90
J	10	83
K	22	92
Sum	36	91



The Gastronet

Norwegian survey, 11 hospitals, 2635 colonoscopies

Endoscopist	Sedation (%)	Coecum (%)	Pain (%)
NN	21	75	36
NN	13	86	15
NN	0	82	41
NN	14	83	26
NN	56	96	54
NN	42	92	50
NN	53	84	70
NN	93	91	4
NN	62	100	26
Average	36	91	34

Why such differences in practice?

- Expectations of the patient
- Personal experience/training of the endoscopist
- Availability of anaesthetic services
- Cost and availability of monitoring equipment
- Teaching units: The need to train colleagues in endoscopic technique (?)
- **Local tradition and training**



Colonoscopy without sedation



- Good training
- Good instruments
- Enough time

- For some, learning takes ages...
- ...and they should leave it to others



Colonoscopy screening without sedation -considerations

- exp: 20% will need analgesia
- iv. drugs are not feasible
- Nitrogene oxide??
 - Good analgesia
 - Patient controlled
 - Rapidly in-out
 - No impairment after exam





The New York Times
ON THE WEB

Sept, 7th, 2004

"Where the Healing Touch Starts With the Hospital Design"