INTRODUCTION
Routine documentation of screening-colonoscopy provides a basis for information on the quality of healthcare in Germany. Special quality aspects e.g. instrument withdrawal time, preparation quality or patient acceptance remain largely unaccounted for; there has also been no audit performed for collected data. In the present assessment, we prospectively gathered and analyzed various quality aspects of screening-colonoscopies.

AIMS & METHODS:
From October 2006 to March 2008, we prospectively documented results, sedation, preparation-quality and complications of all screening-colonoscopies performed in 18 private practices in Berlin. Patients were given questionnaires, which they were instructed to send back after one week; questions included e.g. acceptance of colonoscopy-preparation, overall colonoscopy acceptance, as well as eventual late complications. A 5-year-follow-up has been planned.

RESULTS:
In an intermediate analysis till end September 2008, 12135 examinations were documented [m:f=47%:53%, mean age: 64.5 years (range ±13)]. The following data were found: Cecum-intubation rate: 98%; adenoma detection rate: 21.05%; patients with adenomas: 2548; total number of adenomas: 3818; patients with polyps: 4102; total number of polyps: 6973; adenomas per patient: 1.5; carcinomas: 101 (0.83%). Among the detected adenomas, 24.2% were flat lesions and 0.9% contained histologically high-grade dysplasias (HGIN). Instrument withdrawal time was 8.4 min (mean) and 80 complications were recorded (0.66%), 14 of which were primarily noted in the received questionnaires. In regards to patient acceptance (feed-back until now 88% concerning doctors-CRF´s and 83% concerning audit) colonoscopy was viewed as well acceptable in 44% and as somewhat unpleasant in 30% of patients. BECOP total results as evaluated at the 22th of September 08

Case-number n=12135
Duration of the study (variable beginning) 10/06 bis 3/08

Completeness after audit
Filled in Doctors-CRF 90 %

In comparison to all examined patients
Patients-CRF until now n= 8519 70% of the doctors-CRF
Due to audit/reworking we suspect an increase of the redeliveries of more than 80%.

Private practices
18 private practices with a total of 21 examiners took part. The included case-volume was between 137 and 1097.

Patients
Male/Female 47% - 53%
Mean age 64.5 years (64.8 men, 64.3 women)

Colonoscopy-Performance
Cecumrate 98% (Cecum: 85%, ileum: 33%)
Colon-cleanness 87.5% good or sufficient
Withdrawal-time 8.4 ± 5.2 min
Sedation None 15%
• Dormicum-based 35%
• Propofol-based 49%
• Others 1%

Sedation-quality 85% complet oder sufficient
(judgement by the examiner)

Colonoscopy-results
Adenomarate 0.315 (all Adenomas/all Patients)
Patients with Adenomas 21.05%

Complications
Acute diagnosed during colonoscopy 0.66%
Later diagnosed by the examiner 0.12%
Stated by the patient 3.4%
(will be clarified in detail)

Patients-inquiry (Data still incomplete; n=8519)
Complaints after the examination (multiple mentioning is possible)
• Flatenulence 48%
• Pain after very strong flatulence 13.5%
• Minimal bloodloss 3.1%
• Strong bloodloss 0.3%
• Fever 0.2%
• Circulation problems 5.8%
• Others 4.8%

Preparation
• Good acceptable 44%
• Something unpleasant 30%
• Unpleasant, tolerable 22%
• Very unpleasant 4%

Sedation
• None 17%
• Very good, nothing remarked 53%
• Very good, remarking something 23%
• Effect not enough, something unpleasant 4%
• Effect not enough, painful 2%
• Uneffective, very painful 0.5%
• Others 0.5%

Examination itself
•Good acceptable 76%
•Something unpleasant 16%
•Unpleasant, tolerable 7%
•Very unpleasant 1%

CONCLUSIONS:
The present prospective investigation shows a high Cecum-intubation rate and an excellent patient acceptance. Some 25% of adenomas were classified as flat. In 1.7% of patients advanced histologies (carcinoma or HGIN) were found. According to delayed-questioning of patients complication-rate increased by about 20%.

LITERATURE: