

Gastroenterologists perceive the colonoscopies they perform to be more appropriate than the evaluation of an expert panel

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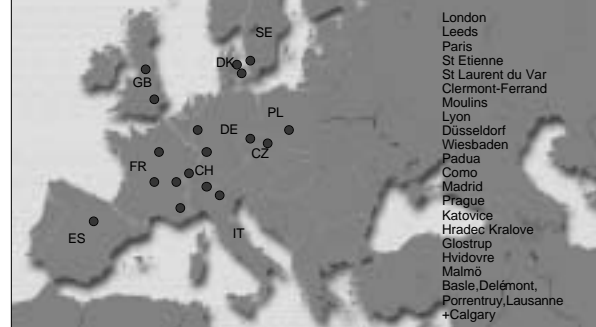
Background

- Little is known about how gastroenterologists (GE) perceive the appropriateness of procedures they perform.
- We compared the evaluation done by practicing gastroenterologist of the appropriateness of colonoscopies they perform with explicit evaluations of similar patient scenarios by an expert panel.

Methods (1)

- 6,006 patients referred for colonoscopy were consecutively included in a large prospective observational study (2001)
- 21 centres
10 European countries + Canada

EPAGE European Study



Methods (2) - variables

- **Patient:** health status, demographics
- **Centre:** public / private, in- / outpatient, volume, waiting list, open access / gate-keeping
- **Colonoscopy:** indication, appropriateness
- **Outcomes:** endoscopic diagnosis, histology

Methods (3) - appropriateness

Appropriateness of colonoscopy was assessed according to criteria developed in 1998 by a European panel using the RAND method.




Methods (4)
RAND appropriateness method

- literature review
(Cf. *Endoscopy*, 8:1999)
- clinical scenarios
- appropriateness rating by expert panel
- panel meeting (European Panel on the Appropriateness of Gastrointestinal Endoscopy)
- www.epage.ch










9-point rating scale

	1	2	3	4	5	6	7	8	9
1 =	extremely inappropriate								
5 =	uncertain / equivocal								
9 =	extremely appropriate								

Index of appropriateness

	=	Appropriate (A)
	=	Uncertain (U)
	=	Inappropriate (I)

Agreement

Median	Agree	Indetermin.	Disagree
1-3			
4-6			
7-9			

Necessary (crucial) care

All criteria must apply :

- The procedure must be *appropriate*
- It would be *negligent not to offer* it to patient
- The *benefit* must be *substantial* for patient
- The *probability of benefit* must be *high*

Source: Kahan JP, Bernstein SJ, Leape LL, et al. Measuring the Necessity of Medical Procedures. *Med Care* 1994;32:357-365.

Methods (5) - analyses

Descriptive and exploratory analyses examining various aspects of the comparison of appropriateness evaluation between the European expert panel and the gastroenterologists who performed the 6000 colonoscopies during multi-centre European study

Results

Patient characteristics (n=6006)

	All centers	Between centers	
		Min	Max
Men (%)	49%	41%	58%
Age (mean)	57.7	53.7	61.9
Significant illness* (%)	24%	8%	49%

*ASA grades III-IV-V

Main indications for colonoscopy

	All centers	Between centers	
		Min	Max
Hematochezia/iron - deficiency anemia	22%	6%	42%
Abdominal pain/ constipation	18%	7%	36%
Surveillance after polypectomy	17%	7%	24%
Colorectal cancer screening	10%	2%	20%

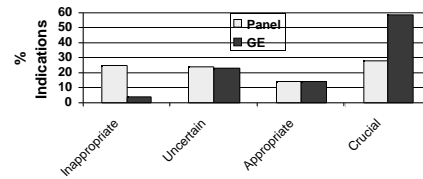
Difference of mean appropriateness ratings

GE 7.2±1.7
(range for centres 6.2-8.2)

Panel 5.4±2.3
(range for centres 4.1-6.3)

p<0.001

Appropriateness evaluation (n = 5381 patients)

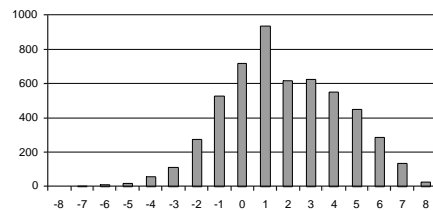


Agreement on appropriateness (n=5381)

Panel	GE		
	I	U	A
I	108	422	933
U	55	410	965
A	56	440	1986

A = Appropriate U = Uncertain I = Inappropriate
kappa = 0.1

Appropriateness of Colonoscopy Difference in ratings (GE – Panel median, n=5381)



Hypotheses

1. Gastroenterologists feel 'obliged' to perform colonoscopies for patients referred to them by other physicians, even if the indication is inappropriate.
2. The ratings of the gastroenterologists in our study reflect the ratings of the gastroenterologists in the multidisciplinary panel.

Mean difference of ratings

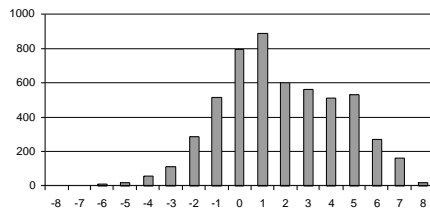
Self-referred by the GEs only

12% of all patients
(721/6006)

mean appropriateness rating
7.9 (GE) vs 5.3 (Panel)

Appropriateness of Colonoscopy

Difference in ratings (GE – GE panel members)



Conclusion

- In this study of leading GI endoscopy centres, European gastroenterologists considered colonoscopy inappropriate in only 4.0% of the patients referred, but crucial in 58%.
- Gastroenterologists (GE) appear to overestimate appropriateness of colonoscopies they perform, both in referred and self-referred patients, as compared to an expert panel.
- The differences between the two assessments beg for an explanation.

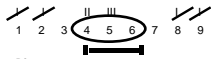
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Intrapanel agreement

Agreement



Disagreement

