

PRE-ENDOSCOPY PATIENT OVERVIEW

This study is not a review of a sample of all patients undergoing therapeutic endoscopy; it is a study of inpatients who died within 30 days of a therapeutic endoscopy which reflects a very small percentage of patients undergoing this procedure. Most of these inpatients, 91% (1,619/1,774), had been admitted as an emergency and in 44 cases the admission method was unknown.

One part of the endoscopy questionnaire required clinicians to provide an assessment of the patient's risk of death within 30 days of the proposed procedure. In the majority of cases where information was provided (74%, 1,303/1,753), death was either a definite risk (60%, 1,056/1,753) or expected (14%, 247/1,753). These values are reflected in the patient's ASA status (Table 7).

Key point

Most patients, 85%, were deemed to have an ASA status of 3 or poorer.

Table 7. Pre-endoscopy condition

ASA Status	None	Small	Definate	Expected	Sub-total	Not answered	Total
1	2	10	12	4	28	1	29
2	61	47	97	15	220	2	222
3	157	50	355	46	608	11	619
4	72	20	464	97	653	8	661
5	9	0	91	77	177	1	178
Sub-total	301	127	1,019	239	1,686	23	1,709
Not answered	15	7	37	8	67	42	109
Total (%)	316 (18)	134 (8)	1,056 (60)	247 (14)	1,753	65	1,818

Case Study

A very elderly patient was admitted following a severe stroke. After five weeks in hospital oral feeding was judged to be inadequate. Although their condition was very poor, assessed as ASA 5, a PEG was inserted. The patient deteriorated after the procedure and a decision was made to give only palliative care. The patient died two weeks after the PEG insertion.

In this case the endoscopist should have recognised that the severity of the patient's condition should have precluded this procedure. The opinion of the advisors was that there was no benefit to the patient's care, even in the two-week period before death. Issues relating to PEG insertion are discussed in more detail in a separate chapter later in this report.

Key point

Two or more co-existing medical conditions were present in 76% of patients.

Information was collected on the patients' concurrent medical conditions.

Table 8. Co-existing medical conditions (answers may be multiple)

Co-existing medical condition		Total <i>n</i> = 1,755
Respiratory	COPD	274
	Acute chest infection	456
	Asthma	65
Cardiac	Ischaemic heart disease/previous MI/angina	473
	MI within three months of the endoscopy	44
	Valvular heart disease	69
Neurological	CCF (at present or in the past)	253
	CVA/TIAs	548
	Dementia	197
	Acute confusion state	127
	Psychiatric disease	61
	Parkinson's disease	58
Hepatic/pancreatic		411
Alimentary		218
Renal failure	Acute	179
	Chronic	122
Endocrine	Non-insulin dependent diabetes mellitus	167
	Insulin dependent diabetes mellitus	51
	Hypothyroidism	53
Musculoskeletal		181
Haematological	Bleeding disorder	73
	Immunosuppression	25
Sepsis		164
Other		534
Total		4,803
None		79
Not answered		63

Co-existing medical conditions were present in all except 79 patients (Table 8), with two or more conditions in 76% (1,341/1,755), and greater than 4 in 14% (249/1,755) (Table 9). It is interesting to note that cerebrovascular disease was the commonest co-existent condition, and this is likely to reflect the age distribution of the patients in this study.

Table 9. Count of co-existing medical conditions by procedure

Procedure	0	1	2	3	4	5	6	7	8	9	10	12	Sub-total	Not answered	Total
PEG	13	99	201	157	116	67	34	10	1	1	1	1	701	18	719
ERCP	27	56	47	39	28	16	7	7	0	0	0	0	227	10	237
Upper GI	37	174	223	146	102	56	22	10	7	1	1	0	779	30	809
Lower GI	2	6	14	8	11	4	1	1	1	0	0	0	48	5	53
Total	79	335	485	350	257	143	64	28	9	2	2	1	1,755	63	1,818
(%)	(5)	(19)	(28)	(20)	(15)	(8)	(4)	(2)	(<1)	(<1)	(<1)	(<1)			