ADEQUACY OF BOWEL PREPARATION USING SODIUM SULFATE BASE FOR COLONOSCOPY AND CECAL INTUBATION RATE WHILE Performing COLONOSCOPY
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BACKGROUND
Bowel preparation is one of the quality measures while performing colonoscopy. Success of the colonoscopy is dependent on adequate bowel preparation. Boston bowel preparation scale is used to assess adequacy of bowel preparation. One quarter of colonoscopies are associated with inadequate bowel preparation.

A score of 7/9 is considered adequate bowel preparation and is expected in >95% of all colonoscopies. Sodium Sulphate preparation is being predominantly used for majority of patients. Cecal intubation is one of the quality measures while performing colonoscopy. Success of the colonoscopy is dependent on at least >90% departmental intubation rates.

AIM’S & OBJECTIVES
1. To achieve a BBPS score of 9/9
2. To achieve 100% cecal intubation rate

PATIENTS AND METHODS
Source of data collection: A total of 654 patients were recruited between January 2021 to December 2021, included inpatients and outpatients aged between 18 and 85 years, undergoing colonoscopy in our medical centre after cleansing preparation.

Type: Prospective study.
Sodium sulphate split preparation, first dose was given in the evening (19:00p.m.), and the second in the morning before the procedure (6:00 a.m.). Each dose was diluted in 500 mL of cold water. The day before colonoscopy the patient was encouraged to drink at least 2 L or more of clear liquids.

Patients with an urgent indication for colonoscopy, intolerance to one of the used components, or insufficient compliance, renal insufficiency, preexisting congestive cardiac failure, ascites patients were excluded from the study.

THE BOSTON BOWEL PREPARATION SCALE

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Represents an unprepared colon segment. The mucosa is not visible due to solid feces, and the fecal masses cannot be removed.</td>
</tr>
<tr>
<td>1</td>
<td>Parts of the mucosa in the colon segment can be seen, but other areas of the same segment cannot be seen well due to bloackage with stool and/or opaque liquid.</td>
</tr>
<tr>
<td>2</td>
<td>The mucosa of the colon segment can be seen well, with minor amounts of residual stool, small fragments of stool and/or opaque liquid.</td>
</tr>
<tr>
<td>3</td>
<td>The entire mucosa of the colon segment can be seen well, with no residual soiling.</td>
</tr>
</tbody>
</table>

The sum total of the three segments

CRITERIA
Assessed in three areas: Right colon, Transverse colon and Left colon.
Total score =9
Score > 7 is considered adequate.

RESULTS DATA BETWEEN 1/1/21 - 31/12/21
A total of 654 patients, in which colonoscopy has been done, cleanliness response by Sodium sulphate preparation on average of 6.91 as per Boston bowel preparation scale, and cecal intubation rate was 97.9% observed in those patients with good bowel preparation.

BOSTON BOWEL PREPARATION SCALE ANALYSIS

CONCLUSION
✓ Efficacy, tolerance, and safety have to be considered when choosing the agent for each patient.
✓ The schedule of administration, including timing and the diet chosen, has implications for the quality of cleansing.
✓ In this study, adequacy of bowel preparation by split preparation method and achieving cecal intubation rate, it was concluded that there is an adequate bowel preparation with this method and more than 90 % cecal intubation rate is achieved.

REFERENCES
1. Sodium Sulfate Based Tablets (Sutab) for Colonoscopy Preparation. JAMA 2021;326(14):1431–1432.