Optimizing the Use of Endoscopy for Young, Otherwise Healthy Patients with Dyspepsia

**Aim**

• To measure adherence to the CWC recommendation for dyspepsia

**Background**

• Dyspepsia affects 20% of the population
• Use of EGD is often low yield and findings in patients < 55 years without alarm symptoms are rare
• In 2015, Calgary Gastroenterologists partnered with Calgary Primary Care Networks to develop a Dyspepsia Pathway (www.specialistlink.ca)

**Methods**

• Ethics approval obtained
• Procedure reports and pathology reviewed for esophagogastroduodenoscopy (EGD) done to investigate dyspepsia in Calgary between April 1 - June 30 in 2015, 2016, and 2017
• Laboratory and prescribing data used to further refine the cohort (other indications)
• Physicians consented to receive individual reports with peer comparators at a facilitated audit & feedback (A&F) session in March 2018

**Results**

**EGDs on dyspepsia patients <55 years in Calgary hospitals**

<table>
<thead>
<tr>
<th>Procedure Description</th>
<th>Number of EGDs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total EGDs on patients with dyspepsia</td>
<td>1358</td>
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<tr>
<td>EGDs on patients without alarm symptoms</td>
<td>841</td>
</tr>
<tr>
<td>EGDs on patients without alarm symptoms or other indications</td>
<td>514</td>
</tr>
<tr>
<td>Potentially low yield EGDs</td>
<td>517</td>
</tr>
<tr>
<td>Clinically significant findings</td>
<td>10</td>
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</tbody>
</table>

**Conclusions**

• Approximately 685 low yield EGDs are performed annually in Calgary to investigate dyspepsia in young patients without alarm symptoms
• Significant practice variation exists amongst physicians in the Calgary Division
• Facilitated A&F helped identify strategies to improve the appropriate use of endoscopy
• Repeat measurement is planned for later in 2018
• Ongoing partnerships with specialists, primary care physicians and patients are needed to ensure the appropriate investigation and management of this common problem

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[Data Table]