Anesthesia assistance used in 8.7 percent of colonoscopies

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(HealthDay)—Anesthesia assistance is used in 8.7 percent of outpatient colonoscopies, with wide regional variation, but its use does not affect patient risk or outcomes, according to research published in the February issue of *Gastroenterology*.

To evaluate the rate and predictors of anesthesia assistance in outpatient colonoscopy, Jason A. Dominitz, M.D., of the VA Puget Sound Health Care System in Seattle, and colleagues conducted a retrospective study using a 20 percent sample of Medicare administrative claims submitted during 2003, involving 328,177 adults aged 66 years and older who underwent outpatient colonoscopy examination.

The researchers found that anesthesia assistance was used in 8.7 percent of outpatient colonoscopies. Black race, female gender, and having a non-screening indication were independent predictors for the use of anesthesia assistance, in multivariate analysis. There was an increase in anesthesia assistance with medium income and comorbidities. The Medicare carrier was the strongest predictor of anesthesia assistance, and the odds ratios varied from 0.22 for the Arkansas carrier to 9.90 for the Empire carrier in New York. Additionally, its use varied widely among endoscopists. The use of anesthesia assistance was not associated with polyp diagnosis, biopsy or polypectomy, or complications.

"We found significant regional and site of service variation in the use of anesthesia assistance with outpatient colonoscopy among Medicare beneficiaries, even after adjusting for key patient characteristics," the authors write. "This practice has enormous economic implications for society, as the use of an anesthesia provider adds a considerable cost to each procedure and is at variance with recommendations from professional societies."

More information: Abstract
Full Text

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