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## Higher Serrated Polyp Detection Rates Are Associated With Lower Risk of Postcolonoscopy Colorectal Cancer: Data From the New Hampshire Colonoscopy Registry

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## Abstract

### INTRODUCTION:

We used New Hampshire Colonoscopy Registry data to examine the association between postcolonoscopy colorectal cancer (PCCRC) and sessile serrated detection rates (SSLDRs).

### METHODS:

We included patients with either a colonoscopy or a CRC diagnosis in the NH State Cancer Registry. PCCRC was any CRC diagnosed  $\geq 6$  months after index examination.

### RESULTS:

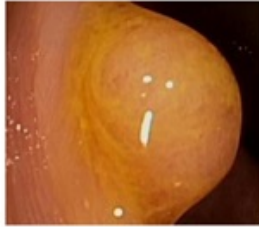
Of 26,901 patients, 162 were diagnosed with PCCRC. The hazard ratio for PCCRC was lowest for patients whose endoscopists had the highest SSLDR quintile ( $\geq 6\%$ ) (hazard ratio 0.29; 95% confidence interval 0.16–0.50).

### DISCUSSION:

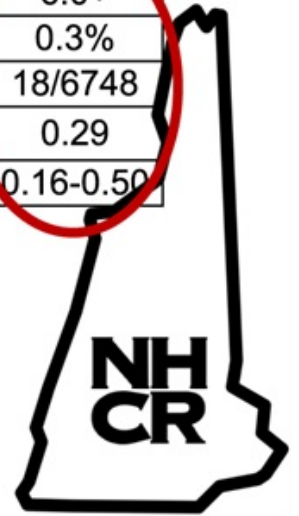
Endoscopists with higher SSLDRs had lower risks of PCCRC. These data validate SSLDR as a clinically relevant quality measure.

# Endoscopist SSLDR and Post Colonoscopy CRC Risk

|                 |        | Sessile serrated lesion Detection Rate (SSLDR) |           |           |           |           |
|-----------------|--------|--|-----------|-----------|-----------|-----------|
|                 |        | <1.0   | 1.0-<2.0  | 2.0-<4.0  | 4.0-< 6.0 | 6.0+      |
| Unadjusted risk | %      | 1.4%   | 0.6%      | 0.6%      | 0.4%      | 0.3%      |
|                 | N      | 58/4117  | 46/8075   | 22/3950   | 18/4011   | 18/6748   |
| Adjusted Hazard | HR     | 1.0  | 0.41      | 0.45      | 0.38      | 0.29      |
|                 | 95% CI | Ref  | 0.28-0.61 | 0.27-0.75 | 0.22-0.66 | 0.16-0.50 |



SSLDR of 6% or greater provided optimal protection from PCCRC



[Anderson] et al. *Am J Gastroenterol.* [2023]. [doi:10.14309/ajg.0000000000002403]  
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