中文題目:糜爛性食道炎診斷的相關討論:醫師與病人的認知;一個內視鏡資料庫診斷之回 顧性分析 英文題目: Endoscopic diagnosis of erosive esophagitis: the awareness of doctors and patients, a

 $\Psi \subset \Psi \square$ Endoscopic diagnosis of erosive esophagitis. the awareness of doctors and patients, a retrospective analysis on an electronic EGD database

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Background: Life style changes, decreasing prevalence Hp infection may account for an increasing trend of GERD incidence in the Asian country. Whether increased patient and/or physicians' awareness about GERD contribute to these changes is unknown. To investigate the potential factors for the discrepancy of endoscopy (EGD) diagnosis of erosive esophagitis (EE) through a retrospective review, by the current gastroenterology specialist from an electronic EGD database cohort.

Method and Material: 1st part of the study: We randomized collected 90 patient's EGD photo-view of the EC junction from 9-10/2016. These pictures were reviewed by 4 gastroenterology specialists blind to the report. Inter-observer's variation for the presence of EE according to the LA classification were calculated (Kappa=0.437). Consensus conference was held subsequently among the 3 specialists having better kappa correlation. Based on the established consensus, we performed 2nd session of EGD review of the 90 reports in addition to another 101 reports (Kappa=0.648). The 191 case is defined as the EGD database 1. 2nd part of the study: After excluding those report with UGI bleeding, esophageal tumor, esophageal varices and infectious esophagitis, 498 cases of the electronic endoscopy photos focused on the EC junction between Oct/2003~Jan/2004 (EGD database 2) are evaluated by the 3 specialists who were blind to the original EGD report. Demographic data and original EGD diagnosis, features of EGD photo database were recorded. The results are divided to 3 groups based on the comparison between current diagnosis of EE and those of the original report (group A: EE not diagnosed previously; group B: findings consistent with previous diagnosis; group C: previous diagnosis with EE but no evidence in point of current review).

Result: After excluding 60 cases with indistinct photo image, 438 cases were included in this study. The group profile and features of EGD photo database are shown in table 1. Comparison between group A and group B are shown in table 2. After adjusted those cases with structural lesion outside of the esophagus, EGD junction view recorded in the last part of the EGD examination is the feature reach statistic significance difference between group A and B report (P=0.01). The comparison between the EGD database 1 & 2 are shown in table 3.

Conclusion: The study results showed some distinct features of EGD examination are related with the discrepancy of physician's EGD diagnosis of EE between > 10 year's interval. Increased awareness of physician on GERD is potentially associated with the EGD diagnosis of EE.