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EVALUATION OF CHRONIC CONSTIPATION BY COLONOSCOPY: DOES PATIENT AGE MAKE A DIFFERENCE?

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Most cases of constipation do not require diagnostic evaluation examination beyond anamnesis, a rectal examination and basic laboratory tests. Existence of alarm signs mandates a more extensive evaluation including colonoscopy. The study examined the value of colonoscopy as a function of patient age, i.e. above or below the age of 50, for the detection of significant findings in the evaluation of constipation, mainly malignant processes. Retrospective observational study. Records of 3,482 patients who underwent a colonoscopy as part of a workup for constipation at the Hillel MC between 2000-2014 was reviewed. Patients divided into two age groups, below and above the age of 50. The following data were collected and recorded: additional indications for colonoscopy other than constipation and the colonoscopy findings were recorded and assessed in both patients groups. Data from 3,482 patients, 707 below the age of 50 (20%), and 2,775 above the age of 50 (80%) were summarized. Ten additional indications for colonoscopy were recorded. Normal test results were observed in 457 patients below the age of 50 (65%) and in 1,142 patients above the age of 50 (41%). Colon tumors were detected in 5 patients below 50 (0.7%) and in 54 patients above 50 (1.9%). Our conclusion, colonoscopy identified findings explaining the cause or the results of constipation in both age groups, provides the opportunity to identify the causes of constipation and to detect significant pathology, we support the approach of performing colonoscopy as part of a workup for constipation at any age.

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