

4th International Conference on **Anesthesia**
&
8th Edition of International Conference and Exhibition on
Surgery and Transplantation

July 01-02, 2019 Valencia, Spain

Evaluating management of acute diverticulitis in a surgical assessment unit: completed audit cycle

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Background & Aims: NICE has published an evidence based clinical knowledge summary (CKS) to guide management strategy for acute diverticulitis. This study aimed to compare current practice with NICE CKS for management of patients with acute diverticulitis.

Methods: Sixty patients were included in a prospective audit and completed audit cycle. Consecutive patients with a diagnosis of acute diverticulitis were identified. Data were recorded including demographic information, severity of disease, radiological grading, treatment and follow up management.

Results: First cycle of audit revealed that all patients with uncomplicated diverticulitis were treated with oral antibiotics but none reviewed within 48 hours, as per guidelines. Only 25% were offered appropriate follow up investigation. Those admitted with complicated diverticulitis were appropriately assessed and treated, but 11% not offered follow up investigation. This outlined key areas for improvement. Following departmental awareness strategies, the repeated cycle revealed significant improvement in follow up of uncomplicated diverticulitis. However, 24% patients with complicated diverticulitis remained inappropriately not offered outpatient colonoscopy.

Conclusions: Patients with both uncomplicated and complicated diverticulitis were treated appropriately. However, there was a lack of post-treatment follow up in these patients. The practice has improved after increasing awareness of pitfalls within the department, particularly in uncomplicated groups, but further improvements are warranted.

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