Retrospective audit demonstrating that national guidelines should be applied with confidence in management of acute upper gastrointestinal (GI) haemorrhage in UK: a single centre experience

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Gastrointestinal (GI) bleeding is one of the commonest medical emergencies. The incidence rate of 1.33/1000 population equates to approximately 85,000 cases/year in the UK or one gastrointestinal bleed every 6 minutes. National Institute of Clinical Excellence (NICE) guidelines have set standards on management of Acute GI bleeding in a timely fashion to reduce morbidity and mortality. The aim of this audit is to assess if there's improvement to clinical practice compared to results from previous two years. Data was analysed retrospectively from a total of 33 case notes, randomly selected from a total of 594 case notes and all of which were diagnosed with upper GI bleeding from January to December 2016. Results have demonstrated that all patients had Blatchford score calculated, 100% had appropriate blood tests on admission, and no one received inappropriate blood products. 87.5% who were appropriate for Oesophago-gastroduodenoscopy (OGD) received endoscopy in less than 24 hours. The remaining 22.5% failed were due to Clostridium difficile infection and process failure. There was 0% mortality post endoscopy and no instances of rebleeding despite under calculation of Rockall score for these patients. Even though this is relatively a small sample size, it sufficiently concludes that the implemented changes according to national guidelines have had positive impacts on the mortality and morbidity of patients admitted with acute upper GI haemorrhage. Not every patient received OGD in less than 24 hours after admission, but all had thorough clinical assessments and in cases where OGD was delayed, they had clear clinical reasoning on clinical grounds. However, standards were unmet for the same core reasons from previous audits, i.e. no clear instructions left from endoscopists for Rockall score to be calculated.

Biography
Chaonan Dong has completed her MBBS Degree from School of Medicine at Newcastle University in the UK. She is currently completing Core Medical Training with an interest of specializing in Gastroenterology in the next stage of her training. She has presented in two international conferences previously and has taken active roles in audits and service improvement projects.

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