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RISK OF COVID-19 INFECTION TO BOTH PATIENTS AND ENDOSCOPY UNIT STAFF FOLLOWING ENDOSCOPY: A SINGLE-CENTER PROSPECTIVE COHORT STUDY

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Introduction: The risk of 2019 novel coronavirus (COVID-19) infection among patients and health care workers (HCWs) following endoscopy remains unclear.

Methods: We prospectively evaluated the incidence of COVID-19 infection among patients undergoing outpatient endoscopy and endoscopy unit staff between March and October 2020 at one tertiary care center in New York City. The primary outcome was COVID-19 infection within two weeks post-procedure. The clinical history, demographics, laboratory data, treatment, procedural data, and outcome measures were obtained from patients' medical records. All patients had undergone nasopharyngeal nucleic-acid amplification testing swabs for COVID-19 two weeks post-procedure. The clinical history, demographics, laboratory data, treatment, procedural data, and outcome measures were obtained from patients' medical records. All patients had undergone nasopharyngeal nucleic-acid amplification testing swabs for COVID-19.

Results: A total of 850 endoscopic procedures were performed at our center between March and October 2020. 131 were inpatients and were excluded from the analysis. Among the 719 outpatients, 231 were ERCPs, 111 were EUS, 207 were colonoscopies, and 170 were upper endoscopies. Post-procedure follow-up was obtained in 73% (n=524) of the patients. Of 719, 2 patients (0.86%) tested positive for COVID-19 within 2 weeks following endoscopy. Both patients had prior chemotherapy and were admitted to the hospital, so it is unclear when or where they contracted COVID-19. Advanced endoscopy attending or their associated nurses or technologists were subsequently infected with COVID-19 during the study period.

Discussion: Endoscopy procedures with appropriate PPE and preoperative testing appears to be associated with a low risk of periprocedural COVID-19 infection for outpatient and endoscopy unit staff. Diligence should continue with appropriate universal precaution and preoperative testing for COVID-19.

References: 1. Replik A, Aragami G, Cengia G, et al. Low risk of COVID-19 transmission in GI endoscopy. Gut. 2020 Jun;69(11):1192-1197. doi:10.1136/gutjnl-2020-321341