Visualization Balloon Facilitated Colonoscopy In 103 Consecutive Patients With Documented Difficult or Even Impossible Previous Colonoscopy.

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• Traditional gas-insufflation colonoscopy can be difficult or even impossible in patients with long, torturous colon, especially in the presence of colonic diverticul i and/or fixed colonic turns after previous abdominal surgery. We have previously reported a small pilot study demonstrating initial use of specially designed visualization balloon (Vizballoon®) for airless colonoscopy.

STUDY AIM
To evaluate use of Vizballoon® in patients with documented difficult colonoscopy.

METHODS
• Vizballoon® was inserted through the biopsy channel of colonoscope and filled with 5 cc of water.
• Gas insufflation was switched off.
• Colonoscope was inserted into rectum and advanced till the cecum was reached and identified by appendicular orifice and/or ileo-cecal valve.
• At this point the water from Vizballoon® was aspirated, balloon was removed and CO2 was switched on to visualize colonic lumen on withdrawal of the colonoscope.

RESULTS
• Airless colonoscopies with Vizballoon® were performed in 103 consecutive patients, referred to our center with documented difficulties on previous colonoscopies, including 16 patients (15.5%) with at least 1 prior unsuccessful colonoscopy.
  • Average patient’s age was 66.3±10.9 years.
  • Average BMI was 32.3±10.2 kg/m^2 and 54 patients were females (52.4%).
  • Cecum was reached in all study patients (100.0%) with mean cecal intubation time 15.0±10.9 minutes.
  • None of the study patients required external pressure or patient’s position changes.

CONCLUSION
Visualization balloon eliminates gas insufflation, facilitates colonoscope insertion and reaching the cecum in patients with documented technically difficult or even impossible previous colonoscopies.