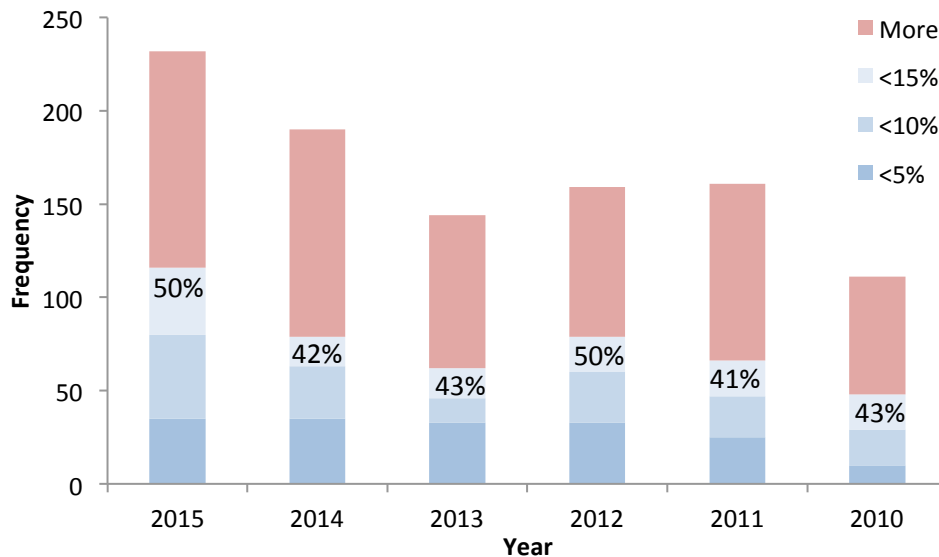


SeHCAT Audit

Comparison of diagnosis

SeHCAT studies have been analysed from 2010 to 2015. Retention of SeHCAT after 7 days is considered abnormal below 15%. The graph below shows the number of SeHCAT studies which were conducted during those years, and the amount of abnormal scans reported.

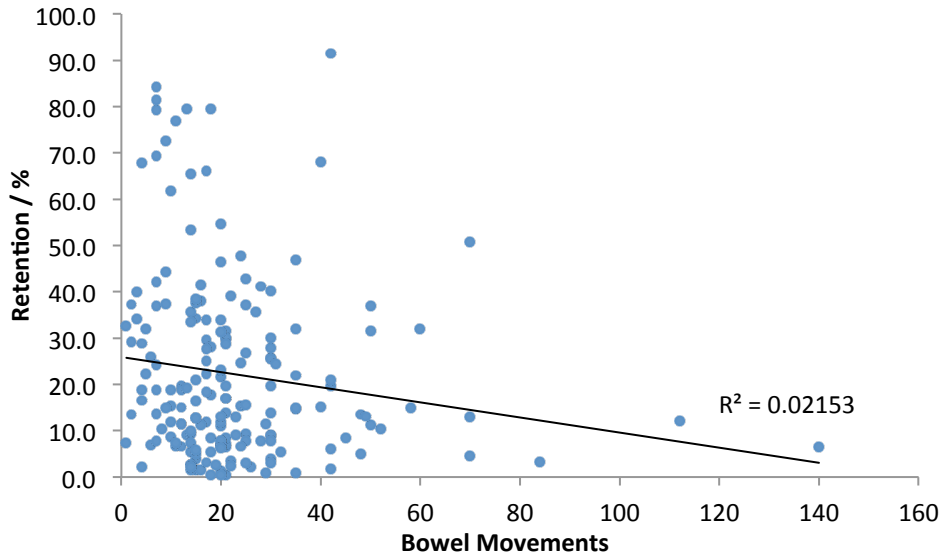


The amount of patients who are considered to have bile acid malabsorption (BAM) is consistently 50% or less of those who undergo the test.

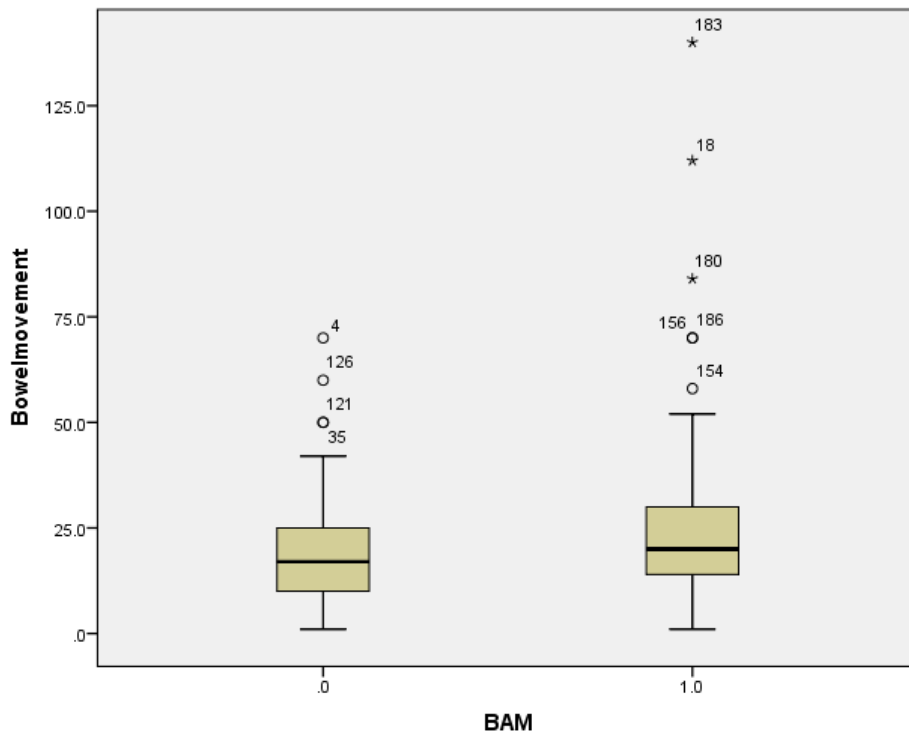
Predictability of SeHCAT

During the test SeHCAT patients are asked a number of questions about the frequency, and urgency of their symptoms and the medication they take. The patients answer the questions themselves and the questions are sometimes subjective (e.g. experience symptoms occasionally, sometimes, or all the time?). It is of interest whether these questions are relevant to diagnosis; whether these questions are able to screen out patients for the test? Are they a good indicator of the SeHCAT retention, or presence of BAM?

Linear regression analysis was performed on the 2015 data (a total of 200 patients). Only the number of bowel motions in the 7 days of the test correlated significantly with the SeHCAT retention (significance 0.046). The graph below shows the linear regression.



If comparison is made between the number of bowel movements of those patients who were considered to have BAM (number 1 in the graph below), and those who were considered normal (number 0 in the graph below), then a small increase in the mean is observed, which is statistically significant (Wilcoxon sign ranked test, 0.023).



Conclusion

The audit showed that currently 1 in 2 patients seen are being diagnosed with BAM. The only pre-study question which correlated to SeHCAT retention was the number of patient's bowel movements.