

15 patients underwent piecemeal resection and thus had R1/Rx histopathological margins by default. Colonic perforation occurred in 2 of the 67 patients and bleeding complications were observed in 7 individuals.

After a median follow-up of 1.5 years (range 0.5–3.6 years), none of the patients who underwent *en bloc* resection and five of those who underwent piecemeal resection had endoscopically detectable remnant disease or recurrence. Subsequently, four patients in the piecemeal resection group were successfully treated with second stage ESD-assisted EMR; hence, at a median of 18 months follow-up, 66 (98%) of the 67 participants had been cured.

This study is the first to demonstrate that resection of an ALM with complicating mucosal fibrosis is technically feasible by ESD-assisted EMR. The authors conclude that this approach might be effective and safe for the management of patients with ALM complicated by chronic ulcerative colitis.

Original article Smith LA *et al.* (2008) Endoscopic resection of adenoma-like mass in chronic ulcerative colitis using a combined endoscopic mucosal resection and cap assisted submucosal dissection technique. *Inflamm Bowel Dis* **14**: 1380–1386

Music reduces the amount of sedation needed and procedure time during colonoscopy

Early detection of potentially abnormal polyps in the colon can prevent up to 90% of colon cancer cases. Screening by means of colonoscopy is, however, an uncomfortable experience and many people put off or avoid the procedure owing to fear and anxiety. Sedation (e.g. with midazolam) can be used during the procedure but might increase the risk of cardiovascular complications. Alternative nonpharmacological methods of reducing anxiety and discomfort have, therefore, been developed and researched.

In a recent meta-analysis, Tam *et al.* investigated the effect of listening to music on procedure time and amount of sedation used during colonoscopy. Data from eight studies including 722 patients were analyzed. Overall, time taken for colonoscopy was shorter for patients who listened to music than for the control groups (combined mean difference -2.84 , 95% CI -5.61 to -0.08). Of the six studies that examined the

use of sedation, four showed a reduction in midazolam dose in the group of patients who listened to music (combined mean difference for all six trials -0.46 , 95% CI -0.91 to -0.01).

The authors suggest that listening to music helps to relax the patient, reduces the need for sedation and enables the physician to complete the procedure in a shorter time, which also reduces the length of time during which the patient feels discomfort. In addition, a reduction in the amount of sedation required during colonoscopy could lead to reduced health-care costs.

Original article Tam WWS *et al.* (2008) Effect of music on procedure time and sedation during colonoscopy: a meta-analysis. *World J Gastroenterol* **14**: 5336–5343

PPI use increases the risk of *C. difficile*-associated diarrhea in hospitalized patients

Clostridium difficile-associated diarrhea (CDAD) is the most common type of hospital-acquired diarrhea. Risk factors implicated in the development of CDAD include use of antimicrobial agents, advanced age, hospitalization, and more recently, the use of PPIs. PPIs can inhibit gastric acidity, which enables survival and proliferation of ingested *C. difficile* spores and toxins. As the associations between PPI use and CDAD are unclear, Aseeri *et al.* carried out a retrospective study of hospitalized patients with CDAD.

A total of 188 patients were included in the study: 94 cases identified as *C. difficile* toxin positive and 94 controls matched by age, sex, antibiotic use, and location of patient within the hospital. The majority of patients with CDAD were receiving antibiotics, older than 70 years, female, located in a medical (rather than surgical) unit, and were in private (rather than shared) rooms. Exposure to gastric acid suppression (PPIs or H₂-blockers) during hospitalization was higher in patients with CDAD (76.6%) than controls (42.6%). Use of PPIs was associated with a threefold (3.6 times) elevated risk of developing CDAD. In addition, patients with previously diagnosed renal failure were identified to be at a 5.7 times increased risk of developing CDAD.

Reports have indicated that gastric acid suppression agents are overused in hospitalized patients. The findings of Aseeri and colleagues