

AS A PATIENT, HOW CAN I TAKE PART IN ECO-FRIENDLY ENDOSCOPY?

The following information was devised by The Eco-Responsibility and Sustainability Development Committee from the French Society for Digestive Endoscopy (SFED). The European Society for Gastrointestinal Endoscopy (ESGE) are grateful for the opportunity to bring these important resources to a wider audience.

KEY FACTS

- For medicine to be sustainable, it must also be eco-responsible
- One day of hospitalization = 45 kg CO₂ (≈ 225 km by car)¹
- Transportation represents >40% of the total environmental footprint of a procedure²
- By being informed and involved, patients can significantly reduce this footprint

I CAN REDUCE MY IMPACT BY...

Reducing carbon-intensive travel	• Bicycle / train / subway >>> car • Avoid taxis (ecological footprint x2 due to empty return trips)	• Limit the number of hospital visits
Accepting (and even requesting) teleconsultations	• Each avoided face to face consultation = reduced ecological, economic and professional impact • Information visits before a procedure	• Follow-up consultations after procedures • Communication of pathology results
Participating in screening and follow-up surveillance	• Early screening allows treatment or intervention at a precancerous stage: less severe, better outcomes, lower impact^{3,4}	• Accepting recommended surveillance intervals, offers the best balance or benefit between protection and impact
Digitalizing my health care pathway	• Use of digital health insurance card • Email-based appointments and documents exchange	• Avoid missed appointments or notify early, so that the slot can be reassigned
Reducing my impact during hospitalization	• Arrive on time and attend appointments • Choose meals without plastic packaging • Use reusable cups instead of disposable plastic	• Avoid disposable clothing when possible (bring comfortable personal clothing) • Maintain positive eco-friendly engagement with healthcare teams

References :

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- (2) Lacroute J, Marcantoni J, Petitot S, et al. The carbon footprint of ambulatory gastrointestinal endoscopy. *Endoscopy* 2023; 55: 918–926. doi:10.1055/a-2088-4062
- (3) Alcock R, Shaukat A, Kisiel JB, et al. Environmental impact of colorectal cancer screening with colonoscopy and multi-target stool DNA (mt-sDNA) testing. *Health Aff Sch* 2025; 3: qxaf041. doi:10.1093/haschl/qxaf041
- (4) Yusuf H, Gupta V, Osaghae I, et al. Longitudinal impact of screening colonoscopy on greenhouse gas emissions. *PLOS ONE* 2024; 19: e0307133. doi:10.1371/journal.pone.0307133