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**Reducing scope 3 carbon emissions in gastrointestinal endoscopy: results of the prospective study of the ‘Green Endoscopy Project Würzburg’**

Henniger D, Lux T, Windsheimer M, et al. [Reducing scope 3 carbon emissions in gastrointestinal endoscopy: results of the prospective study of the ‘Green Endoscopy Project Würzburg’.](https://gut.bmj.com/content/73/3/442) Gut 2024; 73: 442-447. doi: 10.1136/gutjnl-2023-331024

Carbon emissions remain a critical issue and interventions are needed to limit the carbon footprint of Endoscopy. Scope 3 carbon emissions are indirect emissions that includes manufacturing, packaging and transportation of purchased goods as well as waste management. Henniger et al., sought to identify measures within an endoscopy department which would result in reduction of scope 3 carbon emissions.

Potentially replaceable endoscopic consumables were identified and their distributing companies requested to fill out a 21-item questionnaire about the products and the companies’ commitments to reducing greenhouse emissions. Using defined criteria, products and companies were graded. Where items were judged as ‘inacceptable’, alternatives were sought. Companies graded worse than sufficient, were removed as distributors if alternative products were available.

Staff members were informed of the study, instructed on waste management and requested to limit the number of examinations including devices without affecting the usual workflow. A carbon calculator was applied to each item purchased to calculate scope 3 emissions during the intervention period then compared with the same period of the previous year.

26/40 companies filled out the questionnaire, all of whom were judged to be at least sufficient. The remaining 14 were graded as ‘inacceptable’. Procurement of alternative items was only possible for 47/332 (14.6%) consumables. The total number of endoscopies (1666) and instruments per procedure decreased by 4.1% and 10% respectively when compared to the previous year. Using fewer and alternative instruments resulted in 11.5% less carbon emissions and was not associated with a higher risk of procedure-related complications.