**BACKGROUND**
- **Sedative Endoscopy in Cirrhotic Patients**
  - The indiscriminate use of sedative drug during endoscopy can pose a risk of minimal hepatic encephalopathy (MHE) in patient with liver cirrhosis.
  - However, it has not been studied yet which drugs are safest and most inviting on these patients.
- **Stroop effect & test in Korea**

**AIMS**
To evaluate which one among midazolam, propofol, or combination therapy, was the least likely to cause complications including MHE by using Stroop application in cirrhotic patients.

**PATIENTS AND METHODS**
- **Period**
  - From January 2018~ October 2018
- **Inclusion criteria**
  - Patients diagnosed as liver cirrhosis from age 19-70
  - Patients who are going to perform gastroscopy
- **Exclusion criteria**
  - History of overt hepatic encephalopathy
  - Evidence of gastrointestinal bleeding
  - ASA Class IV or higher

**RESULTS**

**Result 1. Demographic and clinical characteristics**

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>All (N=60)</th>
<th>Midazolam (N=20)</th>
<th>Propofol (N=20)</th>
<th>Combination (N=20)</th>
</tr>
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**Result 2. Vital sign changes during sedative endoscopy**

**Result 3. Result of the Stroop test**

**Result 4. Subjective satisfaction measurement**

**CONCLUSIONS**

In patients with cirrhosis, sedative endoscopy using midazolam, propofol, or combination therapy is relatively safe, and was not associated with increased risk of MHE. However, since there is subjective satisfaction or recovery time difference among sedative agents, it should be considered according to each individual patient.