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Summary

BEYOND THE BOWEL: SHIFTING CAUSES OF MORTALITY IN INFLAMMATORY BOWEL DISEASE ACROSS THE BIOLOGIC ERA - DATABASE STUDY OF AMERICAN POPULATION (1990–2025)

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In this CDC database study of 27,655 IBD-associated deaths across evolving biologic treatment eras in the United States, cardiovascular disease remained the dominant underlying cause of death throughout all periods despite biologics' transformative impact on luminal disease control.

KEY POINTS

- Cardiovascular disease accounted for 59.6%, 62.1%, and 57.7% of IBD-associated deaths in the Early Biologic (1999–2010), Widespread 2011–2020, and Widespread 2021–2026 eras, respectively, with absolute cardiovascular deaths declining 41.8% between the two Widespread biologic periods.
- Malignancy-related deaths rose proportionally from 4.5% to 6.6% between the Early and most recent Widespread eras, representing a 47% relative increase that warrants heightened vigilance for immunosuppression-associated neoplasia.
- Infection-related mortality constituted 35.9%, 33.2%, and 35.7% across the Early Biologic, Widespread 2011–2020, and Widespread 2021–2026 periods, demonstrating a 7.6% relative increase in the most recent era.
- Females accounted for 55.9% to 60.8% of IBD-associated deaths consistently across all eras.
- The findings support the urgent need for integrated cardio-gastroenterology care models and systematic oncologic surveillance in the aging IBD population.

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