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Summary

CONTEMPORARY TEMPORAL TRENDS IN COLECTOMY AND RESTORATIVE SURGERY FOR ULCERATIVE COLITIS: AN ANALYSIS OF THE UK IBD BIORESOURCE

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UEG Week Barcelona 2026 | Presentation

Surgery | IBD

October 20, 2026

This UK national cohort study demonstrates a significant decline in both colectomy rates and restorative ileal pouch-anal anastomosis uptake for ulcerative colitis in the era after widespread biologic availability.

KEY POINTS

- Among 14,248 UC patients, 965 (6.8%) underwent subtotal colectomy, with risk significantly lower after 2012 compared to earlier era (HR 0.81, 95% CI 0.67–0.98, p=0.028).
- Patients undergoing colectomy after 2012 were dramatically less likely to receive an ileo-anal pouch than those in the earlier era (OR 0.11, 95% CI 0.07–0.16, p<0.001), with only 53% of recent colectomy patients receiving a pouch.
- Indications for colectomy remained stable across eras, suggesting the decline is not driven by changing disease patterns.
- Among patients who underwent subtotal colectomy without subsequent IPAA, 61.5% had the rectum remaining in situ while 28.5% underwent completion proctectomy.
- The underlying drivers of this marked shift in clinical practice remain unclear and require further investigation, though may reflect evolving surgical decision-making or patient preferences.

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