

SYSTEMATIC REVIEW AND META-ANALYSIS: PSYCHOLOGICAL THERAPIES ARE ASSOCIATED WITH SHORT-TERM IMPROVEMENTS IN PSYCHOLOGICAL HEALTH IN INFLAMMATORY BOWEL DISEASE

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Poster

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This updated systematic review and meta-analysis of 25 RCTs (2,227 patients) found that psychological therapies produce short-term benefits for anxiety, depression, stress, and quality of life in patients with quiescent inflammatory bowel disease, with only depression benefits persisting at final follow-up.

KEY POINTS

- In 21 RCTs of patients with quiescent IBD, psychological therapies significantly reduced anxiety (SMD -0.23, $p < 0.001$), depression (SMD -0.26, $p < 0.001$), and stress (SMD -0.22, $p = 0.03$) scores and improved quality of life (SMD 0.31, $p < 0.001$) at treatment completion.
- Depression score improvements persisted to final follow-up (SMD -0.16, $p = 0.02$), while anxiety, stress, and quality of life benefits did not reach statistical significance at later time points.
- In four RCTs of patients with clinically active IBD, psychological therapies significantly improved quality of life scores (SMD 0.68, $p = 0.02$) but not anxiety scores at treatment completion.
- Effects were strongest with third wave therapies and in trials recruiting selected patient populations with baseline psychological distress, reduced quality of life, elevated stress, fatigue, or depressive symptoms.

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