gutflix
GI learning, personalised

Summary

DIVERSION STOMA IS INDEPENDENTLY ASSOCIATED WITH RADIOLOGICAL REMISSION IN COMPLEX PERIANAL FISTULA: A PROPENSITY SCORE-MATCHED STUDY

Aykut Ferhat Çelik

UEG Week Berlin 2025 | Poster

IBD

October 5, 2025

In Crohn's disease patients with complex perianal fistulas, diversion stoma was independently associated with radiological remission despite being performed at a relatively late stage and in patients with unfavorable prognostic features.

KEY POINTS

- Among 60 stoma patients matched by propensity score to 59 controls, radiological remission (fibrotic closure of all fistula tracts on MRI) was achieved in 60% versus 37.3% of controls, with median time to radiological remission of 29 months.
- Multivariate Cox regression showed diversion stoma independently associated with radiological remission (OR 2.086, p=0.012), while multiple fistulas and trans-sphincteric fistulas were independently associated with poor radiological remission.
- Stoma creation occurred at median fistula duration of 29 months and median stoma duration was 24 months; stoma was reversed in 45.8% of cases.
- The stoma group had higher proportions of females, prior seton use, and longer IBD duration at fistula development, factors the authors characterize as potential negative influencers.
- This propensity-matched observational study may be relevant to gastroenterologists managing refractory complex perianal fistulas in Crohn's disease.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/55826554-a815-11f0-8f94-0242ac140006

AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.