

The impact of COVID-19 pandemic in Gastroenterology: focus on IBD

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Podcast Episode

IBD

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Two gastroenterology specialists discuss Covid-19 risk stratification in IBD patients and vaccination strategies, concluding that IBD itself does not increase Covid-19 severity but specific medications require careful management.

KEY POINTS

- IBD per se is not a risk factor for severe Covid-19, though corticosteroids, azathioprine, and possibly aminosaliclates increase risk, while anti-TNF, ustekinumab, vedolizumab, and tofacitinib appear safe.
- The speakers recommend stopping azathioprine and avoiding combination therapy if an IBD patient contracts Covid-19, but continuing most other treatments including aminosaliclates to prevent disease flares.
- Covid-19 vaccines are considered safe and effective in IBD patients with side effects no different from the general population, though efficacy may be reduced in deeply immunosuppressed patients.
- The speakers advise IBD patients to vaccinate as soon as possible without delaying for treatment schedules, ideally avoiding steroids above 20mg/day prednisolone equivalent and vaccinating before starting immunosuppression when feasible.
- This episode is relevant for gastroenterologists and IBD specialists managing patients during the pandemic and making vaccination decisions.

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