

THE IMPACT OF ENDOSCOPIC HEALING ON DISEASE-RELATED OUTCOMES IN PATIENTS WITH ULCERATIVE PROCTITIS

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Poster

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In a retrospective cohort of 200 ulcerative proctitis patients, achieving endoscopic healing was associated with significantly reduced healthcare utilization, fewer disease-related complications, and lower odds of treatment escalation compared to patients without endoscopic healing.

KEY POINTS

- Among 200 patients with active ulcerative proctitis at baseline, 54.5% achieved endoscopic healing (Mayo endoscopic score 0 or 1) at median 15-month follow-up.
- Patients achieving endoscopic healing had significantly fewer IBD-related emergency department visits (8.3% vs 21%), hospitalizations (5.5% vs 18%), and gastroenterology visits (mean 8 vs 17) compared to those without healing.
- Endoscopic healing was associated with lower rates of iron deficiency anemia (23% vs 41%), iron infusions (10% vs 25%), *C. difficile* infection (0.9% vs 6.6%), and biologic initiation after relapse (15% vs 33%).
- In multivariable analysis adjusting for baseline disease severity, endoscopic healing was independently associated with 68% lower odds of ED visits, 74% lower odds of hospitalization, and 64% lower odds of biologic escalation.
- The authors conclude that endoscopic healing may be a desirable treatment target in ulcerative proctitis for preventing complications and improving long-term outcomes.

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