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Summary

FATIGUE AND IMPAIRED QUALITY-OF-LIFE IN PATIENTS WITH SMALL BOWEL ANGIODYSPLASIA: RESULTS FROM A PROSPECTIVE COMPARISON COHORT STUDY

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A longitudinal study of 28 patients with small bowel angiodysplasia showed paradoxical findings: the proportion with clinically significant fatigue increased over time, yet several quality of life domains improved, compared to 38 anaemia controls without small bowel pathology.

KEY POINTS

- In patients with angiodysplasia, the proportion with clinically significant fatigue (FSS >36) increased from 82.1% to 92.9% at follow-up (p = 0.046), while anaemia controls showed no change (44.7% at both time points).
- Despite worsening fatigue scores, the angiodysplasia group showed statistically significant improvements in several SF-36 domains including Energy/Fatigue, Social Functioning, and Emotional Wellbeing (p < 0.05).
- Among angiodysplasia patients, 67.9% underwent argon plasma coagulation; both APC and non-APC subgroups showed non-significant decreases in the proportion with clinically significant fatigue (57.9% to 31.6% and 55.6% to 33.3%, respectively).
- At baseline, patients with angiodysplasia had significantly lower scores than controls in Role Limitations Physical (25.8 vs 45, p=0.013), Energy/Fatigue (38.5 vs 48.0, p=0.048), and Social Functioning (56.2 vs 67.8, p=0.04).
- This study provides longitudinal data on symptom evolution in small bowel angiodysplasia, a population with limited prior follow-up data, and may inform clinicians managing patients with this condition.

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