THE BIOLOGIC ERA PARADOX: SHIFTING MORTALITY PARADIGMS AND THE "SILVER TSUNAMI" IN INFLAMMATORY BOWEL DISEASE (1990–2024)

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Analysis of 33,639 IBD-related deaths from 1990–2024 shows biologic therapies correlated with a 69% reduction in overall IBD mortality, but cardiovascular disease emerged as the dominant cause of death (56–58% of deaths post-1999) while neoplasm-related deaths increased 49%.

KEY POINTS

- Introduction of biologics in 1999 correlated with a dramatic reduction in absolute IBD-related deaths from approximately 1,870 in 1998 to 580 in 1999, with population-adjusted mortality rates dropping from 0.8–1.0 per 100,000 to 0.6–0.7 per 100,000.
- Cardiovascular disease became the leading contributing cause of death in the biologic era, accounting for 56.2% (1999–2010), 58.4% (2011–2020), and 54.7% (2021–2025) of deaths, compared to digestive/IBD-specific causes accounting for 100% of deaths in the pre-biologic era.
- Neoplasm-related deaths showed a concerning 49% relative increase, rising from 4.5% in the early biologic era to 6.7% in 2021–2025.
- Infection-related deaths remained consistently substantial across biologic eras (35.6%, 33.1%, and 33.8%), suggesting immunosuppression achieves a reasonable risk-benefit balance.
- The findings mandate holistic IBD care integrating aggressive cardiovascular risk management, infection prevention, and enhanced cancer surveillance for an aging, immunosuppressed population.

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