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Summary

CLINICAL CORRELATES OF FATIGUE SEVERITY AND FUNCTIONAL IMPACT IN INFLAMMATORY BOWEL DISEASE: IMPLICATIONS FOR NURSE-LED ASSESSMENT AND CARE

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Cross-sectional study of 653 adults with IBD found disease severity, relapse frequency, and smoking strongly associated with fatigue, with disease severity explaining up to 17.7% of variance.

KEY POINTS

- Disease severity showed the strongest association with fatigue, with moderate and severe disease associated with substantially higher fatigue scores (β up to 0.911; $p < 0.001$)
- Higher number of relapses (β ≈ 0.083–0.107), older age (β ≈ 0.006–0.007), and current smoking (β ≈ 0.157–0.248) were consistently associated with higher fatigue across all outcomes
- No significant associations were observed for sex or disease type (Crohn's disease versus ulcerative colitis)
- Biologic therapy was associated only with higher fatigue intensity (β = 0.267; $p = 0.030$), with limited treatment effects overall
- The study supports integrating structured fatigue assessment into nurse-led pathways to improve symptom recognition and identify patients at higher risk of functional impairment

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