

E-CIGARETTES AND HEAT-NOT-BURN TOBACCO INCREASE POSTOPERATIVE RECURRENCE OF CROHN'S DISEASE: A MULTICENTER EUROPEAN STUDY

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E-cigarettes and heat-not-burn tobacco are associated with significantly increased endoscopic recurrence rates after ileocolic resection in Crohn's disease patients, comparable to conventional cigarette smoking.

KEY POINTS

- In 1157 Crohn's disease patients who underwent ileocolic resection, endoscopic recurrence rates at 6-12 months were 70% for e-cigarette users, 69% for heat-not-burn tobacco users, and 68% for conventional cigarette smokers, compared to 39% for non-smokers (all $p < 0.01$).
- The association between all smoking types and increased recurrence persisted in patients receiving pharmacological prophylaxis and after adjusting for confounders including sex, disease location and behavior, disease duration, type of anastomosis, and previous resections.
- E-cigarette use was associated with a 3-fold increased risk of endoscopic recurrence (OR 3.06, 95% CI 1.08-9.57), heat-not-burn tobacco with a 4.5-fold risk (OR 4.47, 95% CI 2.00-10.77), and conventional cigarettes with a 4.7-fold risk (OR 4.66, 95% CI 3.07-7.20) compared to non-smoking.
- Patients who smoked conventional cigarettes or used heat-not-burn tobacco had significantly shorter disease duration at time of surgery (7.2 and 5.2 years vs. 9.0 years for non-smokers), suggesting a more aggressive disease course, while e-cigarette users showed no significant difference.
- This multicenter retrospective study provides evidence relevant to gastroenterologists counseling Crohn's disease patients about alternative tobacco products in the postoperative setting.

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