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Summary

ASSESSING DISEASE BURDEN BEYOND ACTIVITY: VALIDATION OF THE TURKISH IBD-DISK IN INFLAMMATORY BOWEL DISEASE

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Validation study of the Turkish IBD-Disk, a visual patient-reported outcome tool for assessing disease burden in inflammatory bowel disease, demonstrated acceptable reliability and validity with moderate correlation to clinical disease activity indices.

KEY POINTS

- In 202 patients (114 Crohn's disease, 88 ulcerative colitis), the Turkish IBD-Disk showed high internal consistency (Cronbach's alpha 0.884) and moderate test-retest reliability (ICC 0.68).
- The tool showed moderate correlation with clinical disease activity indices (Harvey-Bradshaw Index rho 0.525, partial Mayo score rho 0.503, both $p<0.001$) and moderate discriminative ability for active disease (AUC 0.72).
- Median IBD-Disk scores increased with disease activity: 21.5 in inactive disease, 38 in mild disease, and 53 in moderate to severe disease, with an optimal cut-off of 27.5 (sensitivity 76.1%, specificity 60.5%).
- Among patients with clinical improvement, median scores decreased significantly from 45 to 23 at six months ($p<0.001$), while stable inactive patients showed modest decrease ($p=0.009$) and stable active or worsening patients showed no significant change.
- The authors conclude the Turkish IBD-Disk captures a complementary dimension of disease impact beyond traditional activity indices and may be suitable for self-assessment and digital health integration.

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