

COMPARISON OF THE SEVERITY OF THE CLINICAL MANIFESTATIONS OF PATIENTS WITH CROHN'S DISEASE BASED ON THE AGE OF DIAGNOSIS ACCORDING TO THE MONTREAL CLASSIFICATION

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A retrospective study of 465 Crohn's disease patients found that age at diagnosis according to Montreal classification correlates with disease severity markers, particularly surgical interventions and treatment intensification.

KEY POINTS

- Patients diagnosed before age 16 (A1 group, n=42) were more likely to require treatment intensification (67.6%) and less likely to have avoided biologic therapy (only 9.8% received no biologics) compared to those diagnosed at ages 16-40 (A2, n=272) or over 40 (A3, n=151).
- A3 patients had significantly fewer surgical interventions than A1 and A2 patients ($p<0.001$), with 82.8% of A3 patients requiring no surgery versus 66.7% in A1 and 64.7% in A2.
- A1 patients were more likely to undergo more than one surgical intervention compared to the other age groups, with 14.3% requiring two surgeries.
- No statistically significant difference was observed among the three groups in overall use of biologic agents ($p=0.079$), though trends showed decreasing biologic use with older age at diagnosis.
- The study included 465 patients with average follow-up of 14 years and may inform clinicians about expected disease trajectories based on age at diagnosis.

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