# NOT ALL NORMAL POUCHES ARE ALIKE: THE CLINICAL AND MICROBIAL SPECTRUM OF DURABLE NORMAL POUCH BEHAVIOR

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**Ultra normal pouches (≥10 years without pouchitis after IPAA for UC) represent a distinct phenotype with taxonomic similarity to FAP pouches and microbial separation from patients who later develop pouchitis.**

## KEY POINTS

- In 60 patients (FAP n=16, ultra normal n=20, normal with later progression n=14, pouchitis n=10) followed for a median 17.7 years, ultra normal pouches were durable for a median 20.8 years.
- Microbial Dysbiosis Index gradually increased across phenotypes: FAP -2.76, ultra normal -1.74, normal with later progression -0.91, pouchitis -0.78.
- Median fecal calprotectin progressively increased: FAP 51.5 mg/g, ultra normal 130 mg/g, normal with later progression 317.7 mg/g, pouchitis 831 mg/g.
- Prevotella copri, Blautia wexlerae, and Faecalibacterium prausnitzii were more abundant in FAP and ultra normal pouches; Ruminococcus gnavus was higher in normal with later progression and pouchitis.
- In patients who later developed pouchitis, Microbial Dysbiosis Index progressively increased over serial samples from 3,496 to 27 days before first pouchitis onset (p=0.032).
- Ultra normal patients had lower pre-IPAA exposure to immunomodulatory or advanced therapy (p=0.08) and showed taxonomic similarity to FAP despite clinically intermediate features.

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