

PREDICTORS OF ILLNESS TRAJECTORY IN NEWLY DIAGNOSED ULCERATIVE COLITIS: A 3-YEAR FOLLOW-UP COHORT STUDY

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Poster

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In newly diagnosed ulcerative colitis patients followed for three years, baseline psychological distress predicted persistently higher gastrointestinal symptom levels, while abdominal pain predicted subsequent increases in psychological distress but not vice versa.

KEY POINTS

- Patients with more psychological symptoms at baseline had increased probability of maintaining higher levels of diarrhea ($p=0.049$) and abdominal pain ($p=0.009$) over three years.
- Reductions in abdominal pain preceded reductions in psychological symptoms in time ($\beta=0.75$, $p<0.001$), but the reverse relationship was not observed.
- Patients with lower baseline diarrhea ($p<0.001$) and abdominal pain ($p=0.003$) had higher chances of maintaining lower levels of psychological distress.
- Higher baseline C-reactive protein predicted greater improvements in mental health after anti-inflammatory treatment ($p=0.017$), suggesting inflammation-driven mental health impairment in a subset of patients.
- Study followed 98 newly diagnosed UC patients (mean age 36, 69% male) from baseline through three annual assessments using latent-class growth analysis and cross-lagged structural equation modeling.

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