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Summary

THE RISK OF SYNCHRONOUS COLORECTAL CANCER IN PATIENTS WITH INFLAMMATORY BOWEL DISEASE AND HIGH-GRADE DYSPLASIA

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UEG Week Copenhagen 2023 | Poster

IBD

October 17, 2023

Patients with inflammatory bowel disease and high-grade dysplasia have twice the odds of synchronous colorectal cancer compared to those with high-grade dysplasia alone, with nearly half having synchronous cancer at diagnosis.

KEY POINTS

- In a retrospective cohort of 37 IBD patients with high-grade dysplasia, 48.6% had synchronous colorectal cancer at index colonoscopy compared to 29.9% of 982 non-IBD patients with high-grade dysplasia (odds ratio 2.22, 95% CI 1.15-4.29).
- Among IBD patients with high-grade dysplasia, 43.2% had cancer in the lesion where dysplasia was biopsied and 5.4% had cancer at another location.
- Seventy percent of IBD patients with high-grade dysplasia were managed surgically, with 17 of 26 undergoing total colectomy.
- All 8 IBD patients with invisible high-grade dysplasia identified on random biopsies underwent total colectomy.
- This study is relevant for gastroenterologists managing surveillance and treatment decisions in IBD patients with dysplasia.

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