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Summary

PREVALENCE OF UNDIAGNOSED INFLAMMATORY BOWEL DISEASE IN PATIENTS WITH SPONDYLOARTHRITIS: EISER STUDY

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A multicenter Spanish study using fecal calprotectin screening followed by endoscopy identified previously undiagnosed inflammatory bowel disease in 4.4% of 559 patients with spondyloarthritis or psoriatic arthritis.

KEY POINTS

- Among 559 patients with spondyloarthritis or psoriatic arthritis, 23 (4.4%) were newly diagnosed with IBD, predominantly Crohn disease (91.3%), with the highest prevalence in radiographic axial spondyloarthritis patients.
- Abnormal fecal calprotectin was found in 53% of axial spondyloarthritis patients and 47% of psoriatic arthritis patients, with mean levels highest in radiographic axial spondyloarthritis (395 µg/g).
- Colonoscopy was performed in 189 patients based on symptoms or elevated fecal calprotectin thresholds (≥80 µg/g without NSAIDs or ≥160 µg/g with NSAIDs), with 40% showing abnormal findings, most commonly aphthous ulcers in the terminal ileum.
- The authors conclude that fecal calprotectin screening followed by appropriate endoscopic or radiological evaluation can identify a relevant subgroup of patients with spondyloarthritis or psoriatic arthritis who have undiagnosed IBD.

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