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Summary

Pouchitis in ulcerative colitis - management strategies and long-term outcome

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Endoscopy | IBD

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In a Danish population-based cohort of 233 pouch surgery patients followed for a median of nine years, half experienced at least one pouchitis episode, but pouch failure requiring permanent ileostomy was uncommon at 7% and rarely caused by pouchitis.

KEY POINTS

- The speaker reported that 47% of patients developed pouchitis within ten years, with a median of three episodes per patient and median time to first episode of 14 months.
- One in three patients with pouchitis progressed during follow-up, mostly to antibiotic-dependent pouchitis, while 7% had antibiotic-refractory disease as stated by the speaker.
- Emergency colectomy for acute severe colitis did not increase pouchitis risk compared to non-urgent colectomy in this cohort, contrasting with some other studies.
- Pouch failure occurred in 14% of patients, but only 7% required permanent ileostomy, most often due to mechanical reasons or sepsis rather than pouchitis inflammation.
- The speaker reported that 61% of patients were treated with ciprofloxacin first-line and only 16 patients required biologics, with most managed by antibiotics alone.
- In the Q&A, the speaker recommended continuing antibiotic treatment for most pouchitis cases rather than biologics, stating that biologic data in pouchitis is not great and antibiotics work well for episodes.

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