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Summary

PREDICTORS OF AN EARLY SEVERE DISEASE COURSE OF NEWLY DIAGNOSED INFLAMMATORY BOWEL DISEASES-FINDINGS FROM A DANISH POPULATION-BASED INCEPTION COHORT (IBD PROGNOSIS STUDY)

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IBD

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In a Danish population-based inception cohort of 501 newly diagnosed IBD patients, 4% of UC, 14% of CD, and 11% of IBDU patients experienced a severe disease course within six months, with distinct phenotypic and biochemical predictors identified for each disease subtype.

KEY POINTS

- Severe disease course, defined as need for surgery or biologics within six months, occurred in 3.8% of UC patients (95% CI 1.9-6.8), 13.9% of CD patients (95% CI 9.2-19.8), and 11.4% of IBDU patients (95% CI 3.2-26.7).
- In UC, extensive disease distribution (E3), severe endoscopic disease, and elevated inflammatory markers (hemoglobin below 7.3 mmol/L, platelet count above 450×10^9/L, albumin below 36 g/L, CRP above 10 mg/L) independently predicted severe early course.
- In CD, perianal disease was the strongest predictor of severe early course; in luminal CD specifically, stricturing phenotype at diagnosis, elevated platelet count, and CRP above 10 mg/L predicted severe course, while initial systemic steroids reduced risk.
- In IBDU, low hemoglobin (below 7.3 mmol/L) was predictive of severe early disease course.
- This prospective population-based study from Denmark enrolled all newly diagnosed IBD patients since May 2021 in a catchment area representing approximately 20% of the Danish population.

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