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Summary

THE TREATMENT AND TREATMENT OUTCOMES OF POUCHITIS IN PATIENTS WITH ULCERATIVE COLITIS FOLLOWING IPAA – A DANISH POPULATION-BASED COHORT STUDY

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A population-based study of 233 ulcerative colitis patients who underwent ileal pouch-anal anastomosis found that 50.64% developed pouchitis over a median 8.36-year follow-up, with most treated with antibiotics and 13.8% experiencing pouch failure.

KEY POINTS

- Among 233 ulcerative colitis patients who underwent ileal pouch-anal anastomosis at Copenhagen University Hospital Hvidovre between 1993 and 2021, 118 patients (50.64%) received 529 pouchitis treatment courses, of which 89.6% were antibiotics.
- Ciprofloxacin and metronidazole were the most commonly prescribed antibiotics with a median treatment duration of 11 days, while adalimumab and infliximab were the most common biologics used.
- Of the 233 patients, 46.4% were antibiotic responsive, 14.6% were antibiotic dependent (needing 4 or more courses per year), and 16.3% were antibiotic refractory (requiring courses longer than 28 days).
- Pouch failure occurred in 13.8% of patients, most commonly due to poor mechanical or functional performance (52.78%) or acute and chronic sepsis (33.33%), with only 8.33% attributed to mucosal inflammation.
- The study was supported by Takeda Pharma A/S and provides real-world data on pouchitis treatment patterns and outcomes in a population-based cohort with long-term follow-up.

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