

# SEVERE MALNUTRITION AND MYOPENIA IN A PATIENT WITH NEWLY DIAGNOSED CROHN'S DISEASE: INFLUENCE OF INFLAMMATORY ACTIVITY AND EARLY MULTIDISCIPLINARY MANAGEMENT

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**A case report describes severe protein-energy malnutrition and myopenia in a newly diagnosed 27-year-old female with Crohn's disease, emphasizing the impact of inflammatory activity on nutritional status and the need for early multidisciplinary management.**

## KEY POINTS

- The patient presented with 10 kg weight loss over five months (22% of body weight), severe underweight (BMI 12.3 kg/m<sup>2</sup>), and computed tomography findings indicating myopenia with a Skeletal Muscle Index of 32.44 cm<sup>2</sup>/m<sup>2</sup> compared to a reference of 38.5 cm<sup>2</sup>/m<sup>2</sup>.
- Crohn's disease was confirmed with ileal involvement, stenosing type (Montreal A2L1B2), and treatment was initiated with combined infliximab and azathioprine therapy.
- Nutritional assessment revealed severe malnutrition with lean mass of 26.1 kg, fat mass of 4.9 kg, phase angle of 4.4°, and abnormal intra/extracellular mass ratio of 0.75.
- Myopenia in Crohn's disease patients is associated with worsened quality of life, increased risk of disease relapse, and therapeutic failure, with the inflammatory process exacerbating malnutrition through anorexigenic mediators.
- The case underscores the need for studies on nutrition and physical exercise as complementary strategies in inflammatory bowel disease management.

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