OUTCOMES OF ACUTE SEVERE ULCERATIVE COLITIS AT INITIAL PRESENTATION

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A single-center retrospective cohort study found that major clinical outcomes including steroid response, need for rescue therapy, colectomy, and mortality were similar between patients with new-onset and established acute severe ulcerative colitis.

KEY POINTS

- Among 185 hospitalized patients with acute severe ulcerative colitis, 62 (33.5%) had new-onset disease and 123 (66.5%) had established disease, with no significant differences in demographic or baseline clinical characteristics.
- Patients with new-onset disease experienced longer hospitalizations (19 versus 12 days, P=0.002), longer delays to rescue therapy (11 versus 6 days, P=0.014), and more severe bacterial infections (16% versus 4%, P=0.005) compared with established disease.
- No significant differences were observed between groups in steroid response, need for rescue therapy, response to rescue therapy, colectomy, mortality, or hospital readmission rates.
- Independent predictors of adverse outcomes at one year included active smoking, extensive colitis, need for rescue therapy, and severe bacterial infections, but not new-onset disease status.
- The authors conclude that standardized, protocol-driven management may mitigate risks across both patient groups.

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