

MALNUTRITION SCREENING IN A TERTIARY INFLAMMATORY BOWEL DISEASE OUTPATIENT CLINIC USING THE MUST TOOL

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Poster

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Self-administered MUST screening identified malnutrition risk in approximately 20% of IBD outpatients, with active disease strongly associated with increased malnutrition risk while disease type, prior biologics, and surgery were not significant factors.

KEY POINTS

- In 106 IBD outpatients at a tertiary Spanish center, 19.81% had intermediate or high risk of malnutrition based on self-administered MUST scoring.
- Patients without remission had significantly higher malnutrition risk (81.81%) compared to those in remission (3.57%, $p < 0.001$), while IBD type, number of prior biologics, and surgical history showed no statistically significant associations with malnutrition risk.
- All 106 patients successfully completed the self-administered MUST, and 105 of 106 reported the questionnaire as very easy or easy to understand and complete.
- The study population comprised 64.15% Crohn's disease and 35.85% ulcerative colitis patients, with 79.25% in remission at the time of assessment.

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