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Summary

POST-OPERATIVE BMI IN PATIENTS WITH CROHN'S DISEASE UNDERGOING ILEO-COLONIC RESECTION IS DETERMINED BY BASELINE RATHER THAN PERI-OPERATIVE BMI

Meir Zemel

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In Crohn's disease patients undergoing ileo-colonic resection, baseline BMI≥25 kg/m² prior to disease exacerbation was associated with post-operative overweight and obesity at 12 months, though short-term postoperative complications and endoscopic recurrence rates were comparable to non-overweight patients.

KEY POINTS

- In 94 Crohn's disease patients who underwent ileo-colonic resection, 33.7% developed overweight or obesity (BMI≥25 kg/m²) at 12 months post-surgery.
- Baseline BMI prior to disease exacerbation was significantly associated with post-operative overweight/obesity (OR 1.699, 95%CI 1.242-2.326, p<0.001), while BMI at time of surgery was not (p=0.153).
- Patients who developed post-operative overweight/obesity had higher rates of ileocolonic disease location compared to those who remained non-overweight (62.5% vs 32.3%, p=0.005).
- No differences were observed between groups in post-operative complications, re-hospitalizations within 12 months, or endoscopic disease recurrence within 18 months (Rutgeerts≥i2b: 30.8% vs 43.1%, p=NS).
- This retrospective single-center study may be relevant to gastroenterologists managing post-operative Crohn's disease patients, particularly regarding weight management counseling.

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