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Summary

BASELINE PSYCHOLOGICAL AND DEMOGRAPHIC PREDICTORS OF TREATMENT DROP-OUT IN A RANDOMISED CONTROLLED TRIAL OF SWEDISH PATIENTS WITH IRRITABLE BOWEL SYNDROME

Michiel Van Nieuwenhoven

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In a randomized trial of 99 IBS patients treated with internet-based CBT or low FODMAP diet, 21.2% dropped out, with dropout predicted by lower extraversion, openness, and agreeableness, higher somatic symptom burden, and emotional vulnerability (model accuracy 80%, AUC 0.827).

KEY POINTS

- Of 99 IBS patients (Rome IV criteria) who started treatment with internet-based CBT, low FODMAP diet, or control, 21 patients (21.2%) dropped out before final assessment.
- Significant predictors of dropout included lower scores on a principal component reflecting low extraversion, openness, and agreeableness, alongside higher somatic symptom reporting.
- Additional predictors were emotional vulnerability, marital status, education level, age, and gender, with the model achieving 80% classification accuracy, sensitivity 0.79, specificity 0.81, and AUC 0.827.
- Dropout barriers in the CBT arm included treatment length, complexity, and time demands; in the low FODMAP arm, dietary restrictions and food costs were cited.
- Incorporating baseline psychological, personality, and demographic assessments may help identify patients at risk for dropout and guide tailored adherence strategies, though external validation in larger samples is warranted.

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