

PERIPHERAL JOINT AND ENTHESIS INVOLVEMENT IN NEWLY DIAGNOSED PATIENTS WITH INFLAMMATORY BOWEL DISEASE (IBD): SYMPTOMS, CLINICAL AND ULTRASONOGRAPHIC FINDINGS

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UEG Week Copenhagen 2023

Poster

IBD

October 15, 2023

In a prospective study of 110 newly diagnosed IBD patients, half had objectively verified joint or enthesal inflammation by ultrasound and clinical examination, suggesting peripheral spondyloarthritis may be underdiagnosed in this population.

KEY POINTS

- Among 110 newly diagnosed IBD patients (mean age 42, 34% Crohn's disease, 59% ulcerative colitis), 52% had arthritis or enthesitis on clinical examination and 49% had inflammation in at least one joint or enthesis detected by ultrasound.
- Ultrasound detected synovitis in 29% and enthesal inflammation in 34% of patients; 46% fulfilled ASAS classification criteria for peripheral spondyloarthritis.
- Among patients reporting musculoskeletal symptoms (40% of cohort), 69% had tender or swollen joints or entheses on clinical evaluation and 64% had inflammation by ultrasound, showing good overlap between patient-reported symptoms and objective findings.
- Thirty-six percent of asymptomatic patients had clinical and ultrasound signs of arthritis or enthesitis, and the pattern of involvement was predominantly peripheral joints with Achilles tendon and lateral epicondyle most commonly affected.
- This study characterizes musculoskeletal manifestations at IBD diagnosis before systemic treatment initiation; findings may inform rheumatological screening and treatment decisions in newly diagnosed IBD patients.

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