

DEVELOPMENT OF A RISK PREDICTION TOOL FOR INFLAMMATORY BOWEL DISEASE (IBD) IN PATIENTS PRESENTING IN PRIMARY CARE WITH ABDOMINAL SYMPTOMS, A UK BASED STUDY.

Nigel Trudgill

UEG Week Copenhagen 2023

Poster

IBD

October 15, 2023

Researchers developed and internally validated risk prediction tools for IBD, ulcerative colitis, and Crohn's disease in primary care using a UK database of over 2 million patients with lower gastrointestinal symptoms.

KEY POINTS

- The study analyzed 2,056,398 patients with lower GI symptoms from the CPRD database (2010-2019), of whom 11,192 had an IBD diagnosis including 7,033 with UC and 4,138 with CD.
- The IBD model incorporated demographic factors (age, sex, ethnicity, smoking, BMI, comorbidity index, loperamide use), co-existing conditions (anxiety, depression, IBS, haemorrhoids), extraintestinal manifestations (mouth ulcers, ophthalmic, primary sclerosing cholangitis, dermatological), and laboratory abnormalities (low Hb, MCV, albumin, ferritin; raised CRP, ESR, calprotectin).
- The UC model excluded mouth ulcers, IBS, and ophthalmic manifestations; the CD model excluded depression and ferritin but included low vitamin B12.
- The models showed moderate discrimination with C-statistics of 0.71 for IBD, 0.70 for UC, and 0.75 for CD in the development dataset.
- The authors conclude the tools may help prioritise suspected IBD referrals in symptomatic primary care patients.

VIEW THIS CONTENT ON GUTFLIX

<https://gutflix.eu/search/d/5ce02cb4-743c-11ee-8ec1-0242ac140004>



AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.