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Summary

COMORBIDITY BURDEN IN PATIENTS WITH ULCERATIVE COLITIS IN THE BIOLOGIC ERA: A REAL-WORLD ANALYSIS FROM THE USA

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In a US real-world analysis of 720,630 ulcerative colitis patients, substantial psychiatric and systemic comorbidity burdens persist across biologic-naïve, biologic-treated, and immunomodulator-treated populations, with elevated healthcare utilization despite advanced therapies.

KEY POINTS

- Among biologic-naïve, biologic-treated, and immunomodulator-treated UC patients, anxiety was documented in 50%, 51%, and 57%; depression in 42%, 38%, and 46%; and fatigue in 59%, 57%, and 65%, respectively.
- Chronic pulmonary diseases, chronic liver disease, and diabetes were the most commonly observed systemic comorbidities; nearly one-third of biologic-treated patients and half of immunomodulator-treated patients had Charlson Comorbidity Index scores of 3 or higher.
- Emergency room visits occurred in 21% of biologic-naïve, 25% of biologic-treated, and 32% of immunomodulator-treated patients; hospitalizations occurred in 10%, 12%, and 16%, respectively.
- Systemic corticosteroid use was documented in 4% of biologic-naïve, 21% of biologic-treated, and 19% of immunomodulator-treated patients.
- Treatment escalation alone does not fully mitigate the multidimensional impact of ulcerative colitis, suggesting persistent unmet need despite advanced therapies.

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