

NATURAL HISTORY OF ANAL STRICTURE IN PEDIATRIC-ONSET CROHN'S DISEASE: LONG-TERM FOLLOW-UP OF A POPULATION-BASED STUDY

pauline wils

UEG Week Copenhagen 2023

Poster

IBD

October 15, 2023

In a population-based cohort of 1,007 pediatric-onset Crohn's disease patients, anal stricture occurred in only 1.4% at 10 years but increased stoma risk fivefold.

KEY POINTS

- Among 1,007 patients diagnosed with Crohn's disease before age 17, only 1 (0.1%) had anal stricture at diagnosis and 26 (2.6%) developed it during follow-up, with cumulative incidence of 0.6% at 5 years and 1.4% at 10 years.
- History of fistulizing perianal Crohn's disease was strongly associated with anal stricture development (HR 7.6, $p < 0.0001$), as were extra-intestinal manifestations (HR 2.3, $p = 0.0378$) and colonic location.
- Among patients with anal stricture, 92.6% had prior anal ulceration or fistulizing perianal disease, 40.7% required dilatation, and healing was observed only once during median 6.2-year follow-up.
- Anal stricture significantly increased the need for stoma (HR 5.8, $p = 0.0002$), with 33.3% of patients with stricture requiring stoma; one patient developed anal cancer seven years after stricture diagnosis.
- This population-based registry study addresses the poorly characterized natural history of anal stricture in pediatric-onset Crohn's disease.

VIEW THIS CONTENT ON GUTFLIX

<https://gutflix.eu/search/d/272a88d0-743c-11ee-836e-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.