

## DISAGREEMENT BETWEEN ENDOSCOPIC AND TRANSMURAL HEALING IN CROHN'S DISEASE AND THE IMPACT OF DISEASE DURATION

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**In Crohn's disease patients on biologic therapy, endoscopic healing was frequently achieved without transmural healing (63% of cases), with persistent radiological strictures in patients with endoscopic healing associated with long-term bowel damage.**

### KEY POINTS

- Among 84 Crohn's disease patients treated with biologics, 49% achieved endoscopic healing (SES-CD<3 or no ulcers) and 23% achieved transmural healing (complete normalization of mural and extra-mural inflammation on MRE) at 12±6 months follow-up.
- Of patients who achieved endoscopic healing, 63% did not achieve transmural healing, with persistent disease most common in the small bowel (88.5% vs 11.5% large bowel,  $p<0.01$ ).
- In patients with endoscopic healing, radiological strictures persisted in 75% of affected segments (16% post-treatment vs 17% pre-treatment,  $p=0.65$  non-significant), and this persistence was associated with long-term bowel damage (67% vs 13%,  $p=0.02$ ).
- Earlier initiation of biological therapy did not reduce the discordance between endoscopic and transmural healing.
- This study informs gastroenterologists and IBD specialists evaluating treatment targets and prognosis in Crohn's disease patients on biologic therapy.

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