THE IMPACT OF POINT-OF-CARE INTESTINAL ULTRASOUND IN INFLAMMATORY BOWEL DISEASE PATIENTS

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A single-centre retrospective study of 210 inflammatory bowel disease patients found that point-of-care intestinal ultrasound led to management changes in 55.7% of cases, with particularly high impact in symptomatic patients.

KEY POINTS

- Management changed following intestinal ultrasound in 117 of 210 cases (55.7%), including therapy changes, new therapy initiation, and referrals for endoscopy
- Among symptomatic patients (n=53), 89% had medication changes documented after ultrasound, compared to 12.0% of asymptomatic patients undergoing routine monitoring ($p<0.001$)
- Abnormal ultrasound findings were more frequent in symptomatic versus asymptomatic patients (54.7% vs 23.1%, $p<0.001$)
- Faecal calprotectin results within one month prior to ultrasound correlated with bowel wall thickness greater than 3mm on ultrasound ($p=0.03$), as did endoscopy results performed within one month after ultrasound ($p=0.01$)
- The study population comprised patients with Crohn's disease (56%), ulcerative colitis (43%), and IBD-unclassified (1%), with median age 35.6 years and median disease duration 7.0 years

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