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Summary

IBD in paediatric patients

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UEG Week Vienna 2024 | Presentation

Colorectal | IBD | Paediatrics | Pancreas | Primary Care

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The speaker presented paediatric IBD management principles applicable to adult practice, emphasizing IBD mimic screening, nutritional therapy combining exclusive or partial enteral nutrition with biologics, and collaborative transition care between paediatric and adult teams.

KEY POINTS

- The speaker stated that 60 to 80% of children and adults achieve remission with exclusive enteral nutrition, which works for colonic disease including isolated colonic disease, and polymeric feeds should be used as they are as effective as elemental feeds but tastier and cheaper.
- For maintenance enteral nutrition to be effective, the speaker reported patients must take at least 50% of their total daily intake as formula, though this strategy applies to less than 5% of patients and is often used as a time-limited bridge.
- A UK study combining adalimumab with 50% partial enteral nutrition during induction enrolled around 100 randomised patients, with preliminary analysis showing nutrition is a useful adjunct when starting anti-TNF therapy, and results will be presented at major meetings next year.
- The speaker stated that 10% of genetic causes of IBD were found in patients over age 16 in a large study, and recommended genetic testing for treatment-refractory older teenagers or young adults with severe perianal Crohn's disease.
- In Scotland, paediatric IBD incidence continues to rise, with 60 to 70% of paediatric Crohn's patients on biologics, compared to fewer licensed options beyond anti-TNF in paediatric practice.

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