

GRANULOCYTE BIOMARKERS IN STOOL AND SERUM AND THEIR ASSOCIATION WITH DISEASE ACTIVITY AND LOCALIZATION IN PATIENTS WITH INFLAMMATORY BOWEL DISEASE

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Poster

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A study of 97 IBD patients and 100 IBS controls found that faecal and serum levels of calprotectin, myeloperoxidase, NGAL, and eosinophil-derived neurotoxin were significantly elevated in IBD and associated with disease activity and extent in ulcerative colitis.

KEY POINTS

- All four biomarkers (calprotectin, MPO, NGAL, EDN) were significantly elevated in both faecal ($p < 0.001$) and serum ($p < 0.01$) samples from IBD patients compared to IBS controls.
- In active ulcerative colitis versus remission, faecal calprotectin (610.9 vs 45.5 mg/kg, $p = 0.0180$), faecal MPO (6.84 vs 1.30 mg/kg, $p = 0.0479$), serum calprotectin (4599 vs 3128 $\mu\text{g/L}$, $p = 0.0194$), and serum NGAL (298.3 vs 189.3 $\mu\text{g/L}$, $p = 0.0012$) were significantly higher.
- Patients with extensive ulcerative colitis had significantly higher faecal calprotectin (851.6 vs 148.3 mg/kg, $p = 0.0135$), faecal MPO (17.67 vs 2.84 mg/kg, $p = 0.0493$), and faecal EDN (1.34 vs 0.36 mg/kg, $p = 0.0146$) compared to left-sided disease.
- Faecal EDN was significantly higher in Crohn's disease compared to both ulcerative colitis ($p = 0.016$) and IBS, while no biomarkers showed association with disease activity or location in Crohn's disease.
- The authors conclude that faecal MPO may serve as an alternative to faecal calprotectin for monitoring ulcerative colitis activity, and that serum calprotectin and serum NGAL are promising novel markers for disease activity.

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