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Summary

VOLUMETRIC MEASUREMENT OF CROHN'S DISEASE ON MAGNETIC RESONANCE ENTEROGRAPHY: FEASIBILITY, CLINICAL UTILITY, AND ROLE IN ASSESSING TREATMENT RESPONSE

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Volumetric measurement of terminal ileal Crohn's disease on MRE is feasible, correlates with endoscopic disease activity, and detects treatment response to biologics.

KEY POINTS

- In 30 patients, median disease volume was 20.9 cm^3 in those with endoscopically active terminal ileal CD (CDEIS ≥3) compared to 5.7 cm^3 in those without active disease on endoscopy.
- In 6 clinically responding patients treated with biologics, median disease volume decreased from 28.5 cm^3 pre-treatment to 11 cm^3 post-treatment, representing a median percentage difference of -110%.
- Manual segmentation by two board-certified abdominal radiologists showed a mean difference of -3.0 cm^3 with limits of agreement of -21.8 to 15.9 cm^3.
- The authors conclude that volumetric measurement represents a novel, objective MRE biomarker for assessing disease activity and treatment response in CD, worthy of further validation.
- This work addresses limitations of current MRE activity scores such as sMARIA, which often fail to capture early treatment response and rely on 2D assessment rather than full disease volume.

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