ACCURACY OF PANMAYO ENDOSCOPIC SCORE IN PREDICTING LONG-TERM DISEASE OUTCOMES IN ULCERATIVE COLITIS– A PROMISING SCORING SYSTEM

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A retrospective two-center study of 250 ulcerative colitis patients found that the PanMayo endoscopic score, which combines extent and severity, predicted need for biologics and colectomy better than traditional Mayo Endoscopic Score, UCEIS, or Dublin scores over 3-year follow-up.

KEY POINTS

- PanMayo score above 12 points was associated with need for new biological therapy ($p<0.001$) and treatment escalation ($p=0.018$), while MES and UCEIS were not
- In patients with active disease at baseline, PanMayo ($p=0.016$) and Dublin ($p=0.009$) scores were associated with colectomy risk
- PanMayo, MES, and Dublin scores were all positively associated with risk of disease flare-up ($p=0.002$, $p<0.01$, $p=0.003$ respectively)
- All four scoring systems were strongly associated with need for systemic steroids in patients with baseline remission
- The authors conclude that combined endoscopic assessment of extent and severity may be more precise in predicting disease outcomes in ulcerative colitis

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