

DISENTANGLING THE ASSOCIATION BETWEEN INFLAMMATORY BOWEL DISEASE AND OTHER IMMUNE-MEDIATED DISEASES: LEVERAGING GENEALOGICAL, GENETIC, AND MICROBIAL PROFILES ACROSS A HARMONIZED POPULATION FRAMEWORK

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Presentation

IBD

Mechanisms & Personalised Medicine

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Crohn's disease and ulcerative colitis exhibit distinct patterns of correlation with other immune-mediated inflammatory diseases, driven by different genetic and environmental mechanisms including microbiota.

KEY POINTS

- Analysis of 107,651 full Danish sibling pairs revealed CD correlated with asthma and celiac disease (both $p=0.12$), while UC correlated with sarcoidosis ($p=0.16$), multiple sclerosis ($p=0.09$), systemic lupus erythematosus ($p=0.19$), and Sjögren's syndrome ($p=0.15$), but CD did not.
- UC showed microbiota-linked correlations with multiple sclerosis ($p=0.11$) and SLE ($p=0.15$) despite negative genetic overlap ($p=-0.18$ and $p=-0.21$, respectively), suggesting environmental factors including microbiota play a key role.
- Rheumatoid arthritis demonstrated both genetic and microbial convergence with CD (genetic $p=0.12$, microbial $p=0.30$) and UC (genetic $p=0.17$, microbial $p=0.12$).
- Psoriasis correlation with both CD and UC appeared mainly genetically driven (SNP correlations $p=0.23$ and $p=0.25$, respectively) with weak or negative microbiota correlations.
- Findings underscore the need for IBD subtype-specific approaches in clinical management and research design, as CD and UC harbor distinct immunogenetic and microbial associations with other immune-mediated diseases.

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