

INCREASED RISK OF CIRRHOSIS IN PATIENTS WITH INFLAMMATORY BOWEL DISEASE: A DANISH REGISTRY-BASED COHORT STUDY (1998-2018)

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Poster

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A Danish registry study of 495,220 persons found that patients with inflammatory bowel disease had an 84% increased risk of incident cirrhosis compared to matched controls, with the highest risk in those aged 40 years or younger and those with Crohn's disease.

KEY POINTS

- Patients with IBD had significantly higher risk of cirrhosis than matched non-IBD controls (adjusted HR 1.84, 95% CI 1.65-2.04), with 0.9% of IBD patients versus 0.5% of controls developing cirrhosis over median 6.3 years follow-up.
- Risk was most pronounced in younger patients (adjusted HR 3.08 for age ≤ 40 years versus 1.63 for age > 40 years, $p < 0.001$) and in Crohn's disease patients (adjusted HR 2.20 versus 1.72 for ulcerative colitis, $p = 0.04$).
- NAFLD was the leading etiology of cirrhosis (51.6%) followed by alcohol (39.0%), with cirrhosis diagnosed by biopsy and/or imaging in 77.3% of IBD patients.
- The increased risk remained consistent across all cohort entry periods from 1998 to 2018, with the hazard ratio appearing to increase in more recent years.
- The authors suggest these findings point toward a need for focused screening for cirrhosis in IBD patients, particularly in younger individuals and those with Crohn's disease.

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