

DIGESTIVE ULTRASOUND: A KEY TOOL IN CROHN'S DISEASE MONITORING

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A prospective study of 49 Crohn's disease patients compared intestinal ultrasound with CT enterography and colonoscopy, finding ultrasound to be a sensitive and accessible monitoring tool despite limitations in examining the proximal intestine and rectum.

KEY POINTS

- Ultrasound detected digestive thickening in 81.6% of cases, mainly in the terminal ileum, with a sensitivity of 84.4% and specificity of 50%
- CT enterography detected thickening in the proximal small bowel and rectum in 2.2% of cases that ultrasound missed, and no significant difference was found between ultrasound and CT for overall thickening detection
- Ultrasound showed 86.5% sensitivity for mesenteric infiltration and 75% sensitivity for adenopathy detection, both with high specificity
- Ultrasound demonstrated 60% sensitivity for detecting complications, which was significantly lower than CT enterography ($p = 0.002$)
- No correlation was found between wall thickening detected on ultrasound and ulcers identified on endoscopy

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