

DECLINING TRENDS OF REOPERATIONS AND DISEASE BEHAVIOR PROGRESSION BUT NOT FIRST RESECTIVE SURGERY IN CROHN'S DISEASE OVER DIFFERENT THERAPEUTIC ERAS – A PROSPECTIVE POPULATION-BASED STUDY FROM WESTERN HUNGARY BETWEEN 1977–2020, DATA FROM THE VESZPREM COHO

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A 43-year population-based cohort study of 946 Crohn's disease patients in Hungary shows declining reoperation rates and disease progression over therapeutic eras, but no further reduction in first surgery rates after the immunosuppressive era.

KEY POINTS

- First resective surgery rates decreased significantly between the pre-immunosuppressive era (1977-1995) and immunosuppressive era (1996-2008), from 33.3% to 26.5% at 5 years and from 46.1% to 32.6% at 10 years, but remained stable in the biological era (2009-2018) at 28.1% and 33.0% respectively.
- Disease behavior progression from luminal to stenosing or penetrating phenotypes declined significantly across eras, falling from 27.1% to 11.3% at 5 years in the biological era.
- Reoperation rates decreased progressively across all three eras, from 17.3% to 4.7% at 5 years.
- Stenosing or penetrating disease behavior at diagnosis was the strongest independent predictor of resective surgery with a hazard ratio of 4.52, while ileal location at diagnosis showed a modest association with hazard ratio of 1.30.
- This long-term population-based study is most relevant to gastroenterologists and surgeons managing Crohn's disease and planning treatment strategies across different therapeutic eras.

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