

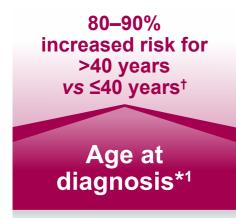
## **IBD SPOTLIGHT**

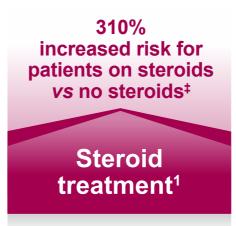


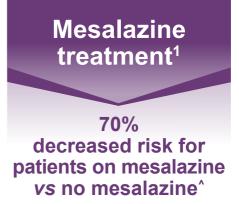
## Did you know?

...that several independent predictors for colorectal strictures have been identified in patients with ulcerative colitis (UC)?

In a retrospective cohort study in patients with UC, diagnosis at age >40 years and steroid exposure increased the risk for strictures, while mesalazine use decreased the risk<sup>1</sup>







No significant association between strictures and: smoking status; family history of IBD; appendectomy; disease extension; previous exposure to anti-TNF agents, immunosuppressants, or vedolizumab<sup>1</sup>

N=439; median follow-up 9.6 years

Physicians should assess and pay attention to these factors in daily practice to ensure the best therapeutic approach to prevent stricture occurrence<sup>1</sup>

\*Age at diagnosis defined by Montreal classification: ≤16 years (A1); 17-40 years (A2); >40 years (A3)

<sup>†</sup>HR of 1 for A3 *vs* 0.2 for A2 and 0.1 for A1 (p=0.008)

‡HR of 4.1 for steroids vs 1 for no steroids (p=0.042)

^HR of 0.3 for mesalazine vs 1 for no mesalazine (p=0.029)

HR: hazard ratio; TNF: tumour necrosis factor; UC: ulcerative colitis

1. Laurain PA et al. Clin Gastroenterol Hepatol 2021;19:1899-1905.e1.

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