

Managing the mild IBD patient

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Ferring Pharmaceuticals have reviewed these slides for technical content

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Disclosures

Dr AB Hawthorne has received honoraria from Takeda UK Ltd, Janssen Ltd, and Ferring Ltd for speaking at, or chairing educational meetings, since Jan 2017

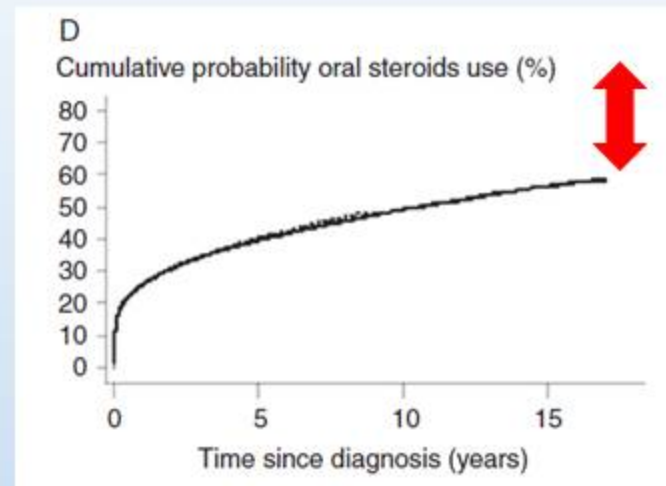
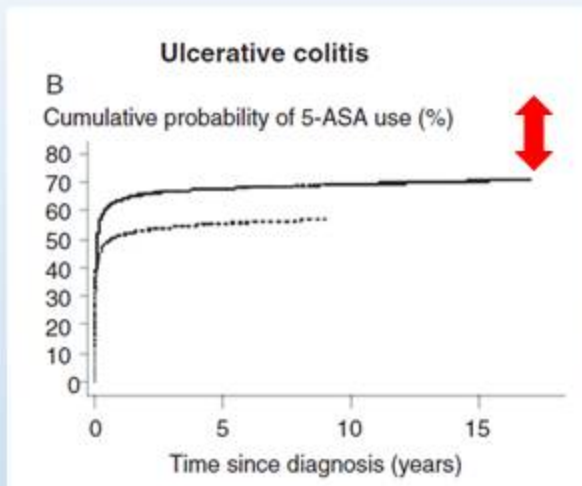
What is mild IBD??

- Not causing bad symptoms
- Not needing much therapy
- Limited extent

How common is mild UC??

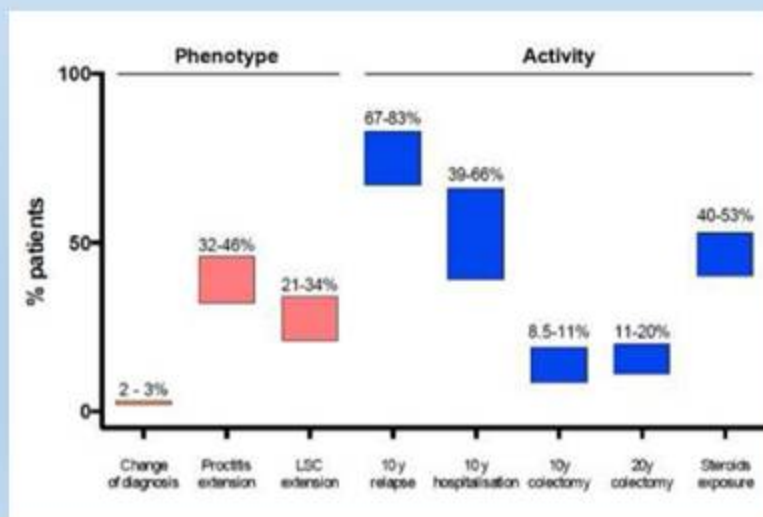
UC

25%* never 5-ASA
40%* never oral steroids



Rungoe C, et al. Gut 2014;63:1607

Literature Review:
17-33% no relapses
over 10 yrs
47-60% no steroids

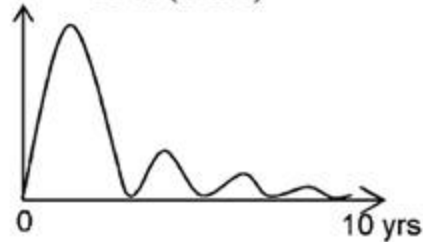


Fumery CGH 2018;16:343

* Approximate values

UC - IBSEN cohort diagnosed 1990-94

55 % (n=208)



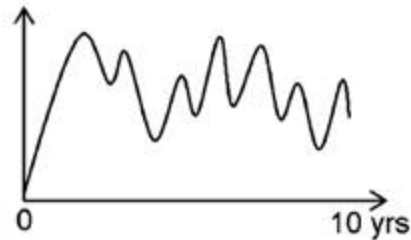
Curve 1: Remission or mild severity of intestinal symptoms after initial high activity

1 % (n=4)



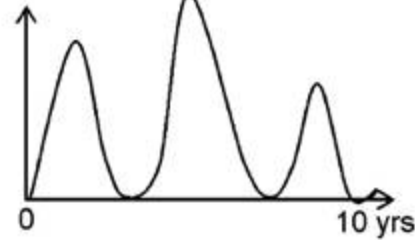
Curve 2: Increase in the severity of intestinal symptoms after initial low activity

6 % (n=22)



Curve 3: Chronic continuous symptoms

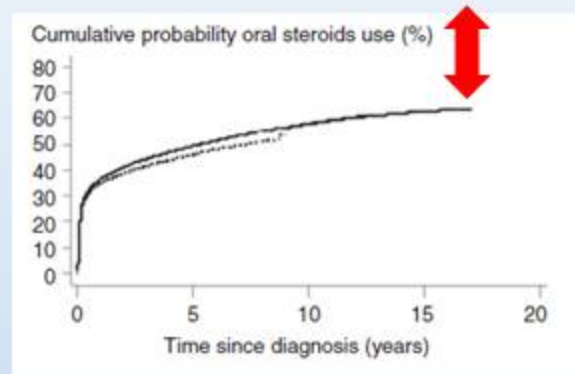
37 % (n=139)



Curve 4: Chronic intermittent symptoms

How common is mild Crohn's??

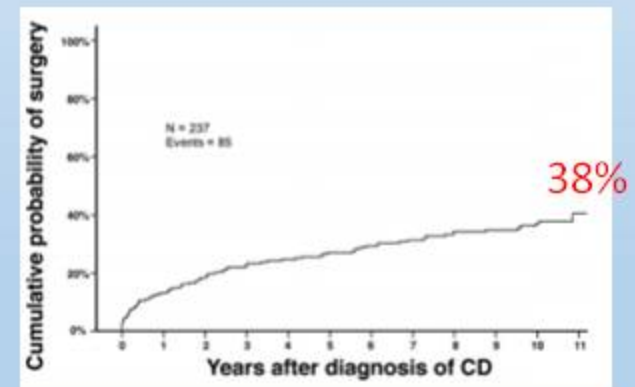
Crohn's
35%* never oral steroids



Rungoe C, et al. Gut 2014;63:1607

Disease Pattern

| | Curve (1-4): | Definitions: |
|-----|--------------|--|
| 43% | | Curve 1: Decrease in the severity of bowel symptoms during the follow-up period |
| 3% | | Curve 2: Increase in the severity of bowel symptoms during the follow-up period |
| 19% | | Curve 3: Chronic continuous bowel symptoms during the follow-up period |
| 32% | | Curve 4: Chronic relapsing bowel symptoms during the follow-up period |



Solberg 2007; 5:1430

* Approximate values

How common is mild Crohn's??

Crohn's- Tertiary cohort from Paris
 15 yr FU Mild-Mod 279 (46.5%)
 (<3 yrs active disease; ≤ 1 operation; no CD-related mortality)

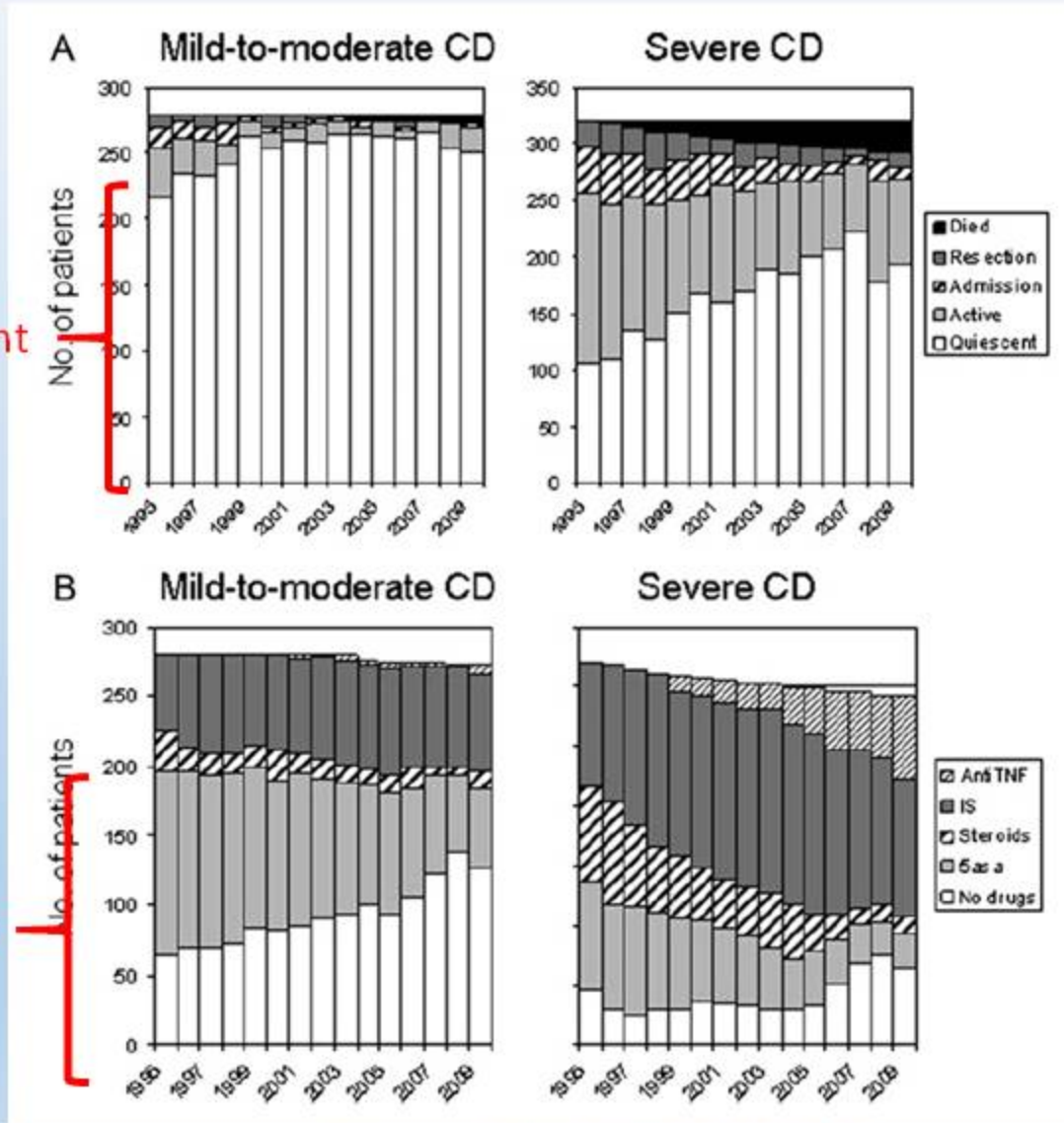
Factors associated with mild-mod course (MV analysis)

- Disease duration
- Rectal involvement
- Never-smoker
- Higher educational level
- Older age

Note: perianal disease not significant factor

Quiescent

5-ASA or no drugs



What is mild IBD??

- Not causing bad symptoms
- Not needing much therapy
- Limited extent

- Quiescent after index flare
- Quiescent after surgery / intensive medical therapy
- “Burnt out” colitis

Why is mild IBD important ?

- Misdiagnosis
- Danger of overtreatment
- Loss to follow-up
 - Recognition of subclinical inflammation/change in extent
 - Need for cancer surveillance
- Impact of disease stigma on QOL and achievements
- Health economics and resource planning
- Understanding aetiology

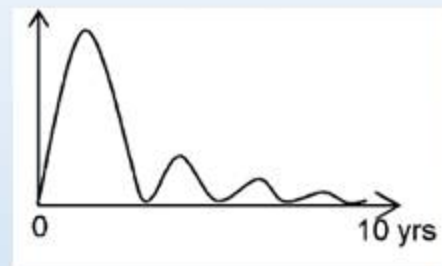
Why is mild IBD important ?

- **Misdiagnosis – it isn't IBD at all !**
 - diverticular colitis
 - mild self-limiting colitis (infective/drugs)
 - a few aphthous ulcers in small bowel

Why is mild IBD important ?

- **Danger of overtreatment**

Edward Louis:- *"The currently available biologics are able to put a subset of patients in longstanding clinical and endoscopic remission, thereby mimicking what can be achieved with "curative" surgery"*



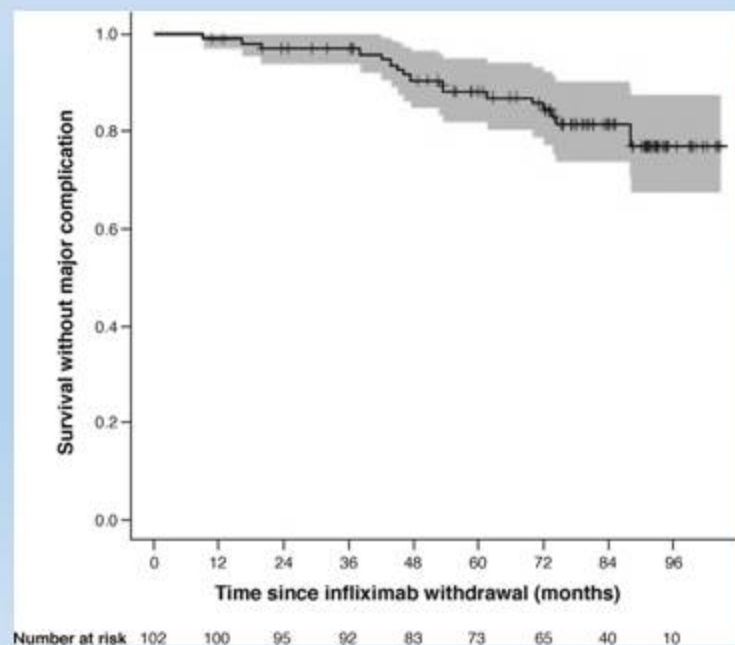
Cohorts stopping anti-TNF:- 40-50% relapse over 2 yrs (vs 10-15% if continue).
50-90% are retreated successfully

Louis IBD 2018;24:725

Long-term follow-up of STORI cohort:-

- only 21.6% are free of biologics/surgical resection/complex perianal disease
- **BUT if biologics are restarted – only 20% have subsequent major complications**

Reenaers CGH 2018;16:234



Why is mild IBD important ?

- **Danger of overtreatment**

Other drugs

Diet and Lifestyle advice

Why is mild IBD important ?

- Loss to follow-up

Does it matter? YES!

Missing subclinical disease activity:

Adelaide: 246 UC patients:-

Clinical remission 61%

Endoscopic " 35%

Histological " 16%

Bryant JGH 2018;33:599

- Colon cancer surveillance
- Change in disease extent
- Treat to Target

Review colonoscopy *with segmental biopsies* important

- Extent
- Inflammation
- Dysplasia

Why is mild IBD important ?

- Impact of disease stigma on QOL and achievements
- Health economics and resource planning

Prevalence of IBD in UK

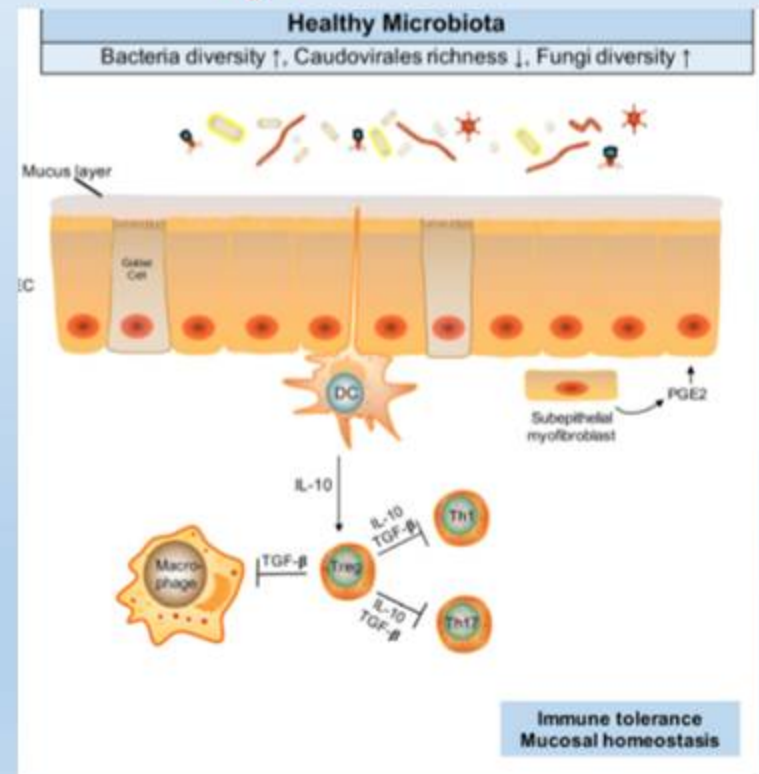
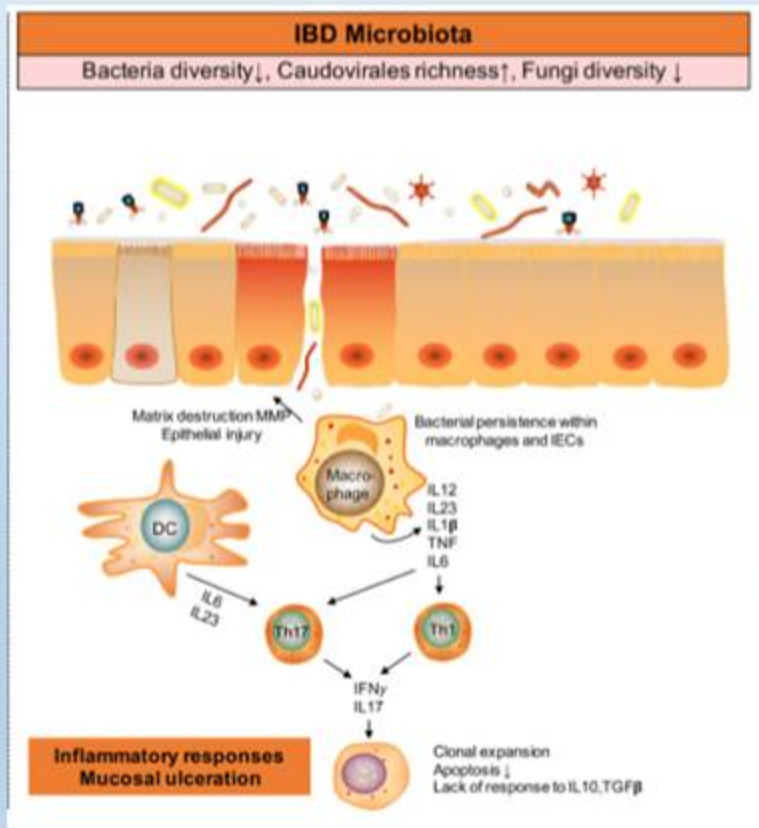
Hamilton Gut 2018;67(S1):A67
Jones JCC 2019;13:S082

Lothian 0.78% (CD 0.28%, UC .43%)

Devon 0.8% (CD 0.31%, UC 0.45%)

Why is mild IBD important ?

- Aetiology

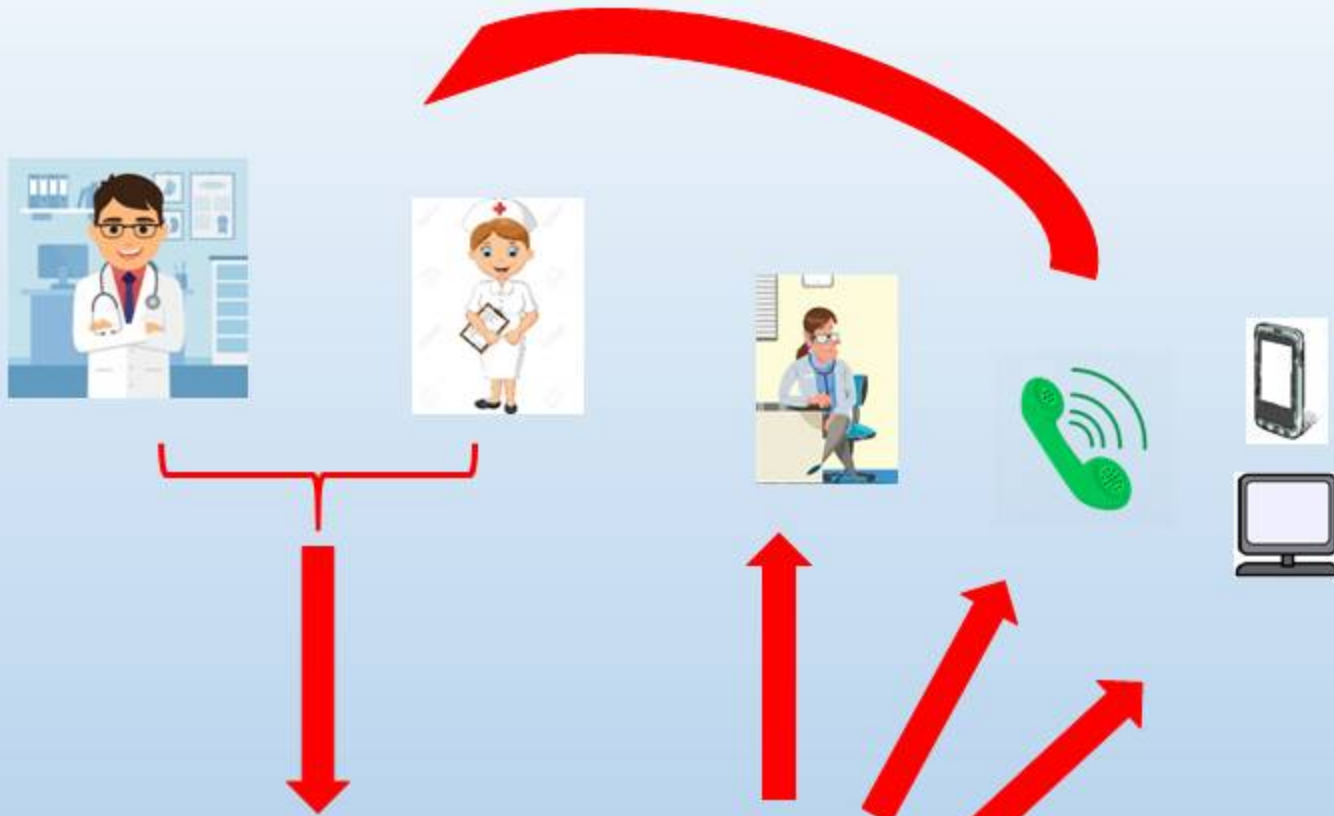


Follow-up for mild / quiescent IBD

Relentless pressure to improve “efficiency” of IBD services:



Follow-up for mild / quiescent IBD



- Establish trust patient & team
- Clear documented plan
- Educate (IBD team/patient/GP)
- Easy access back into service
- Monitor/audit

Summary

- Careful diagnosis and prognosis
- Don't overtreat
- Don't be afraid to stop treatment
- Appropriate remote monitoring
- More research into long-standing quiescent disease