

Clinically active IBD linked to adverse COVID-19 outcomes

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(HealthDay)—Clinically active inflammatory bowel disease (IBD) is

associated with adverse COVID-19 outcomes, especially in younger and middle-aged adults, according to a study published online Sept. 27 in the *Journal of Crohn's and Colitis*.

Amanda Ricciuto, M.D., Ph.D., from The Hospital for Sick Children in Toronto, and colleagues measured clinical IBD activity by physician global assessment (PGA) among IBD patients diagnosed with COVID-19 between March 13, 2020, and Aug. 3, 2021. COVID-19 outcomes of intensive care unit (ICU) admission, ventilation, death, and hospitalization were examined.

The researchers found that adverse COVID-19 outcomes were more common with active IBD among the 6,078 patients: ICU/ventilation/death occurred in 3.6, 4.9, and 8.8 percent of those with remission/mild, moderate, and severe IBD, respectively; hospitalization occurred in 13, 19, and 38 percent, respectively. Effect sizes were larger for [younger patients](#) on stratification by decade. Severe PGA was independently associated with both ICU/[ventilation](#)/death and hospitalization in patients ages 50 years or younger (adjusted odds ratios, 3.27 and 4.62, respectively). In contrast, among patients older than 50 years, severe PGA was not independently associated with COVID-19 outcomes.

"These findings reinforce the importance of maintaining IBD disease control during the current pandemic and may support the implementation of strategies to mitigate the risk of severe acute respiratory syndrome coronavirus 2 infection (distancing, immunization) in IBD patients with severe [disease](#) to prevent poor COVID-19 outcomes," the authors write.

Several authors disclosed financial ties to the biopharmaceutical industry; a number of pharmaceutical companies provided funding for the study.

More information: [Abstract/Full Text](#)

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