

Clinical guideline developed for use of biomarkers in ulcerative colitis

March 17 2023, by Elana Gotkine



In a clinical practice guideline issued by the American

Gastroenterological Association and published in the March issue of *Gastroenterology*, recommendations are presented for the role of biomarkers in the management of ulcerative colitis (UC).

Siddharth Singh, M.D., from the University of California San Diego in La Jolla, and colleagues developed recommendations for the use of biomarkers of disease activity in [patients](#) with established UC in symptomatic remission or with active symptoms.

The guideline panel made seven conditional recommendations. These recommendations include a suggestion for use of a biomarker- and symptom-based monitoring strategy over a symptom-based monitoring strategy for patients with UC in symptomatic remission. Fecal calprotectin 150 µg/g, elevated fecal lactoferrin, or elevated CRP are suggested to inform treatment decisions and avoid routine endoscopic assessment of disease in patients with UC with moderate-to-severe symptoms. However, endoscopic assessment of disease activity is suggested to inform treatment decisions in patients with symptomatic remission but elevated biomarkers and in patients with moderate-to-severe symptoms with normal biomarkers. Endoscopic assessment of disease activity is also suggested to inform [treatment decisions](#) in patients with UC with mild symptoms. Use of a biomarker-based monitoring strategy over an endoscopy-based monitoring strategy was identified as a knowledge gap.

"Currently, biomarkers are considered experimental by insurers," a co-author said in a statement. "This guideline is a major step in showing the value of noninvasive biomarkers and the importance of [insurers](#) covering biomarker monitoring to improve patient satisfaction and [clinical outcomes](#)."

More information: Siddharth Singh et al, AGA Clinical Practice Guideline on the Role of Biomarkers for the Management of Ulcerative

Colitis, *Gastroenterology* (2023). DOI: [10.1053/j.gastro.2022.12.007](https://doi.org/10.1053/j.gastro.2022.12.007)

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