

Study identifies risk factors for extraintestinal manifestations of IBD

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Certain demographic, clinical, and genetic factors heighten the risk for extraintestinal manifestations (EIMs) with inflammatory bowel disease (IBD), according to a study [published](#) online March 13 in

Gastroenterology.

Michelle Khrom, from Cedars-Sinai Medical Center in Los Angeles, and colleagues investigated the clinical, serologic, and [genetic factors](#) associated with EIM complications in IBD. The analysis included 12,083 unrelated individuals with IBD and European ancestry with presence or absence of EIMs (e.g., ankylosing spondylitis, primary sclerosing cholangitis [PSC], peripheral arthritis, and skin and ocular manifestations) across four cohorts.

The researchers found that most EIMs occurred more commonly in women, in those with Crohn disease (especially colonic disease location), and in those who required surgery (both Crohn disease and ulcerative colitis). Risk for EIMs, except for PSC, was higher with smoking.

Serologic associations were seen for PSC (immunoglobulin [Ig]G and IgA, perinuclear antinuclear cytoplasmic antibody; anti-Saccharomyces cerevisiae antibodies; and anti-flagellin) and any EIM (IgG and IgA, perinuclear antinuclear cytoplasmic antibody; anti-Saccharomyces cerevisiae antibodies; and anti-Pseudomonas fluorescens-associated sequence). Significant genome-wide associations were seen within major histocompatibility complex and CPEB4.

"These inflammatory manifestations outside the gut impact about 40 percent of our patients with IBD," coauthor Dermot McGovern, M.D., Ph.D., also from Cedars-Sinai, said in a statement. "Our findings will help us identify those at risk of developing these related conditions."

More information: Michelle Khrom et al, Comprehensive Association Analyses of Extraintestinal Manifestations in Inflammatory Bowel Disease, *Gastroenterology* (2024). [DOI: 10.1053/j.gastro.2024.02.026](https://doi.org/10.1053/j.gastro.2024.02.026)

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