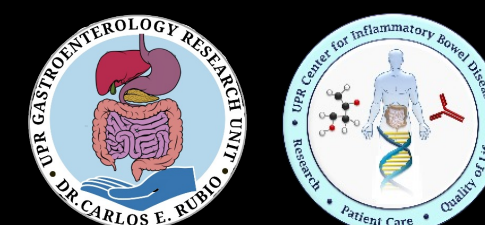




A LONGITUDINAL EVALUATION OF PATIENTS WITH INFLAMMATORY BOWEL DISEASE IN PUERTO RICO



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Background

✓ Incidence and prevalence of IBD is rising in Hispanics; however, disease characterization is scarce.

AIM

✓ To describe clinical outcomes over 3 years of follow-up in a cohort of Puerto Ricans with IBD.

Methodology

The UPR IBD Registry has collected clinical data on patients since 1995.

- A longitudinal survey tool assessed demographic and medical information over time in subjects in the Registry. This study reports findings in participants with a minimum 3-year follow-up.
- Subjects were first interviewed between 2012-2018, and the longitudinal component throughout 2020-2022.
- Variables reported include sociodemographic, body mass index (BMI), medications, hospitalizations and surgeries.
- Intellectus statistics was used for data analysis.
- The study was approved by the MSC-IRB.

Results

91 subjects were recruited, 50.6% (45/91) were male, and 72.5% (66/91) had CD. Two subjects with UC were later re-diagnosed with CD [74.7% (68/91)]. The majority were single (60%), mean age was 39±16 years. Mean BMI increased from 25±6 kg/m² to 27±6 kg/m² [p<0.001] over 3 years. Most-reported level of education was a bachelor's degree (41%). No difference between household income (\$28K-\$29K annually) was noted.

Variables Analyzed

Variable	Original Questionnaire n (%) n=91	Longitudinal Questionnaire n (%) n=91	p-value
IBD Diagnosis			
Crohn's Disease	66 (72.5)	68 (74.7)	<0.001
Ulcerative Colitis	25 (27.5)	23 (25.3)	
BMI by Category			
Underweight	10 (11)	7 (7.7)	<0.001
Normal	34 (37.4)	37 (40.7)	
Overweight	17 (18.7)	23 (25.3)	
Obese	17 (18.7)	24 (26.4)	
IBD Medication			
Aminosalicylates	66 (72.5)	23 (25.3)	0.003
Corticosteroids	65 (71.4)	28 (30.8)	0.891
Immunomodulators	34 (37.4)	22 (24.2)	0.041
Antibiotics	38 (41.8)	10 (11)	0.310
Anti-TNF	54 (59.3)	51 (56)	<0.001
Integrin blockers	5 (5.5)	16 (17.6)	0.003
Interleukin antagonists	5 (5.5)	23 (25.3)	0.013

Note. Due to rounding errors, percentages may not equal 100%.

Clinical Outcomes

76% had hospitalizations in the baseline survey and 29% within the 3-year follow-up. 43% had surgery at recruitment, and 28% during the 3-year follow-up.

Pharmacotherapy

A decreasing trend was observed in the use of aminosalicylates, corticosteroids, immunomodulators, and antibiotics and an increase in the use of integrin blockers and IL-12/23 antagonists. 27.5% of participants reported therapeutic failure in the longitudinal survey.

Conclusion

We observed a significant increase in BMI and targeted therapies after a minimum of three years of follow-up. The lower prevalence of surgery and hospitalizations requires comparison of similar time intervals and disease duration to validate significance. A longer follow-up period with a larger sample is needed to confirm these trends and define outcomes.

Disclosures and Acknowledgements

AbbVie sponsored the study and contributed to the interpretation of data; in writing, reviewing, and approval of the final version. No honoraria or payments were made for authorship. This project is also supported by RCMI grant U54 MD007600 (National Institute on Minority Health Disparities) from the National Institutes of Health. E. Torres has conducted research funded by AbbVie. A Pérez is an employee of AbbVie and owns AbbVie stock. A. Soto-Gonzalez, L. Ramos-Tollinchi, P. Lopez-Marte have nothing to disclose.