

Introduction

Bile acid (BA) sequestrants are commonly used in IBD following ileocecal resection to treat bile acid malabsorption and associated abdominal pain and diarrhea. There is less experience with use of BA binders in IBD patients following colectomy and ileoanal pouch reconstruction.

IBD ileoanal pouch patients frequently experience bouts of diarrhea and abdominal pain and have limited treatment options.

We sought to characterize our institutional experience with BA sequestrants to treat abdominal pain and diarrhea in a large cohort of IBD ileoanal pouch patients with a focus on long term therapy and improvement in patient reported outcomes.

Methods and Materials

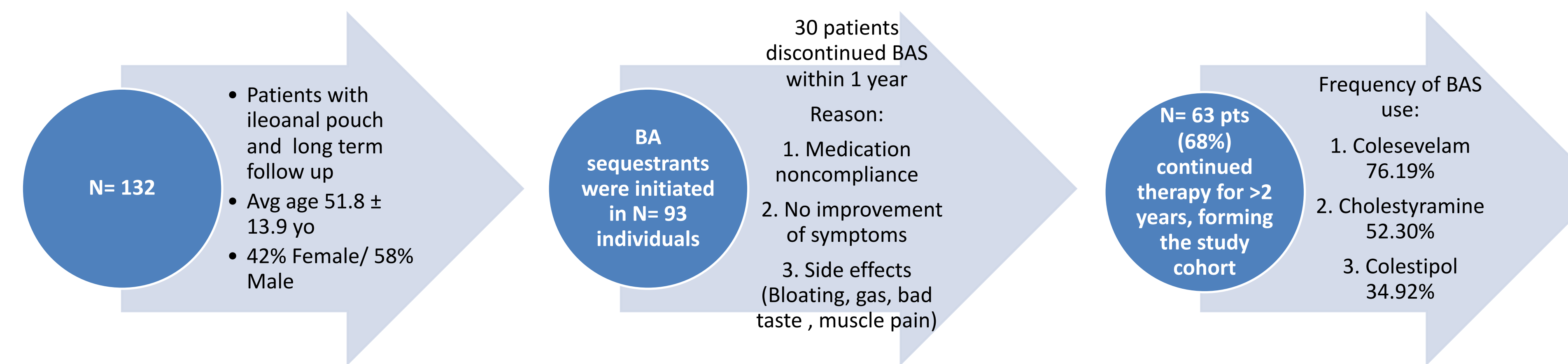
We analyzed a prospective, natural history registry of consented IBD patients followed at a tertiary center (2009-2022).

Patients with ileoanal pouch reconstruction following colectomy were identified and individuals with > 2 years of follow up formed the long-term study cohort.

BA sequestrants included cholestyramine, colestipol and colesevelam.

Patient reported outcomes of diarrhea and abdominal pain, recorded at the time of clinic encounters were organized, and mean scores before and after bile acid binder therapy were compared.

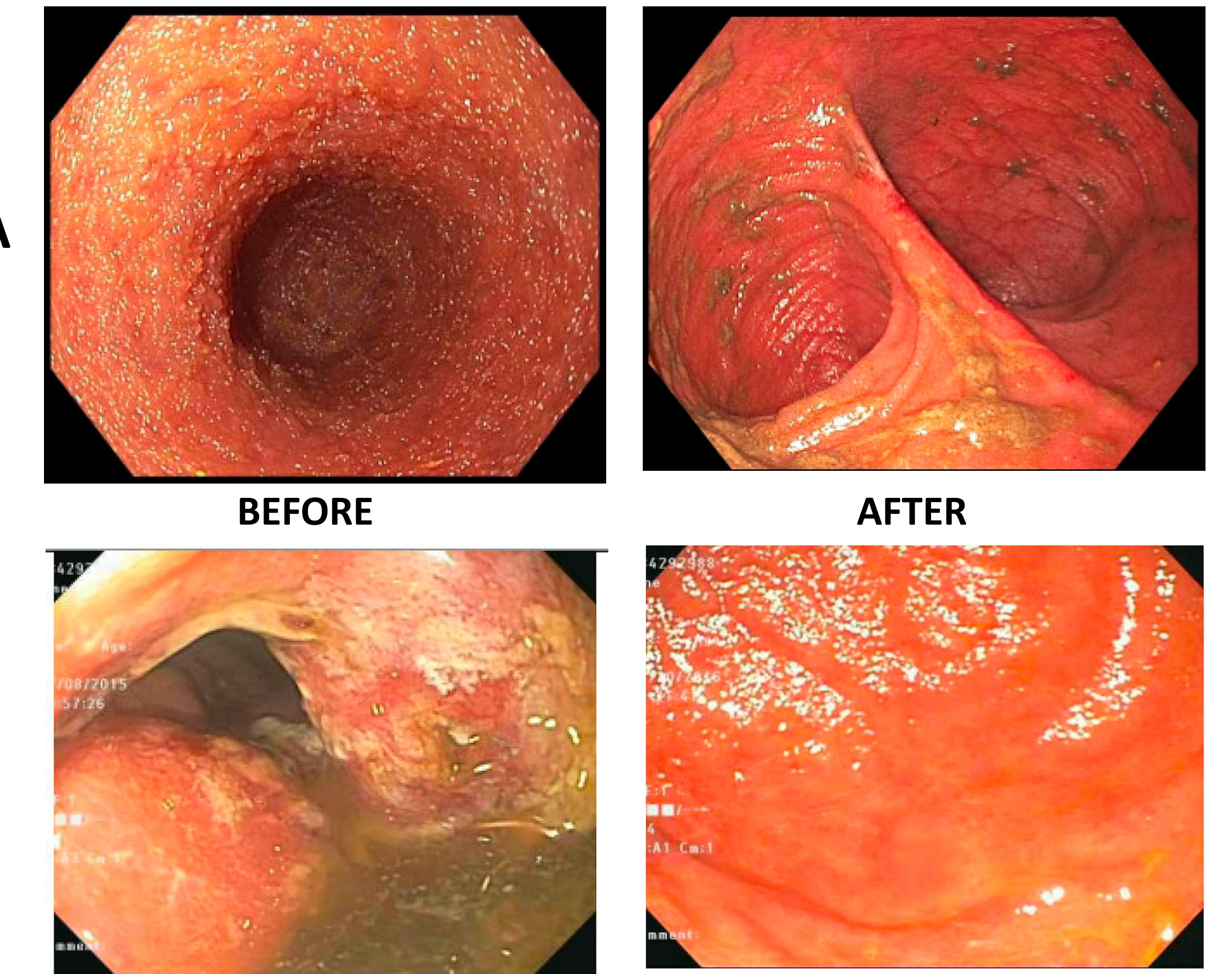
Results



Comparison between before and after initiation of bile acid sequestrant therapy

	Before bile acid sequestrants	After bile acid sequestrants	Mean Difference	T	df	p value
Patient reported outcomes						
Mean number of stools per day	9.02	6.14	2.88	3.5	41	<0.001
Mean abdominal pain score (0=no pain-3=severe pain)	1.21	0.9	0.3	2.4	42	0.017
Health care utilization						
ED visits (mean per year)	1.2	0.94	0.33	2.7	62	0.007
Hospital admissions (mean per year)	0.89	0.35	0.55	4.3	62	<0.001

	Before bile acid sequestrants	After bile acid sequestrants	p value
Rates of Elevation of Inflammatory Markers			
CRP	61.20%	58.06%	1
ESR	39.20%	28.50%	0.5465
Rates of Medication Use			
Antibiotics	97.70%	84.40%	0.077
Immunomodulators	16.90%	20.30%	0.7893
Anti TNF	21.60%	16.60%	0.6056



A: Friable proximal limb of J pouch before bile acid sequestrants and after bile acid sequestrants
B : Ulcerated and friable proximal limb of J pouch before bile acid sequestrants and resolved ulceration and inflammation after

Discussion

A majority of IBD ileoanal pouch patients benefitted from BA sequestrant treatment, reducing number of bowel movements and abdominal pain over a >2 year period, with a parallel reduction in healthcare utilization.

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References

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