

LEARNING OBJECTIVES

- Identify benefits of exclusive enteral nutrition (EEN)
- Identify patient populations that could benefit from exclusive enteral nutrition

CASE PRESENTATION

29-year-old M with untreated Crohn's Disease presenting with 2.5 wks of abdominal pain and started on Ustekinumab

PHYSICAL EXAM

- VS: 98 °F, BP 146/92, HR 134, RR 16
- Gen: Awake, alert, oriented x4, no distress
- Resp: No increased work of breathing
- CV: Tachycardic, regular rhythm
- Abdomen: Flat, soft, tender to light palpation in LUQ, no rebound or guarding

EVALUATION

Enteral Nutrition in Crohns Disease

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COURSE/RESULTS







- Started on piperacillin/tazobactam for 14 days; Did
- Upon completion of 5 weeks of EEN abdominal pain resolved and MR enterography showed resolution of abscess

	Before EEN
WBC	16.21 10*3/uL
CRP	305.6 mg/L



4.5 x 3.5 x 3 cm abscess on presentation

MR Enterography: Significant acute inflammation of the D4 portion of the duodenum and adjacent distal ileum; Associated fistulous tract to a 4.5 x 3.5 x 3 cm abscess in the adjacent central small bowel mesentery not initiate steroids due to the underlying abscess Nasojejunal feeding tube was placed distal to abscess; Patient was initiated on exclusive enteral nutrition to help induce remission in upper GI Crohn's Disease.

After EEN

8.02 10*3/uL

<3.0 mg/L

Exclusive enteral nutrition is when you administer a polymeric formula as the sole source of nutrition for a limited period of time (4-8 weeks)

EEN should be considered for Crohn's Disease patients when they have an intolerance of steroids or related contraindication such as an ongoing infection, especially in cases predominantly affecting the upper GI tract

EEN has been shown to help patients reach remission in 85-90% of cases

- steroids
- therapeutic effect

Gatt et al. Effects of Exclusive Enteral Nutrition on the Microbiota Profile of Patients with Crohn's Disease: A systematic review. 2017.

Triantafillidis et al. The Role of Enteral Nutrition in Patients with Inflammatory Bowel Disease: Current Aspects. 2014.



DISCUSSION

CONCLUSION

• Exclusive enteral nutrition should be considered for Crohn's Disease patients who can not be given

• Despite limited studies it should be considered in conjunction with biologic agents such as Ustekinumab which take multiple weeks to have a

REFERENCES