

Editorial: increasing IBD prevalence and its complications in the context of the COVID-19 pandemic—authors' reply

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Study of Inflammatory Bowel Disease (IOIBD) has undertaken a RAND panel of expert opinion regarding the care of IBD patients during the COVID-19 pandemic.⁹ In time the evidence to support clinical recommendations is likely to develop. Others from epicentres of the COVID-19 pandemic have also given specific recommendations based on their experience.¹⁰


The paper by King et al reminds us of two important and interacting challenges facing IBD clinicians in the future. First, we will continue to see more IBD as the prevalence increases worldwide. This will require improved management strategies to provide high-quality care to more patients. Second, complications of the disease and its treatment, be they established or evolving will require individualised approaches. While some planning will be needed to mitigate these, working together at times of crisis will enable the best results for our patients.

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LINKED CONTENT

This article is linked to King et al papers. To view these articles, visit <https://doi.org/10.1111/apt.15701> and <https://doi.org/10.1111/apt.15769>.

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REFERENCES

- King D, Reulen RC, Thomas T, et al. Changing patterns in the epidemiology and outcomes of inflammatory bowel disease in the United Kingdom: 2000–2018. *Aliment Pharmacol Ther.* 2020;51:922–934.
- Nadeem MS, Kumar V, Al-Abbasi FA, Kamal MA, Anwar F. Risk of colorectal cancer in inflammatory bowel diseases. *Semin Cancer Biol.* 2019. <https://doi.org/10.1016/j.semcancer.2019.05.001>
- Piovani D, Danese S, Peyrin-Biroulet L, Nikolopoulos GK, Bonovas S. Systematic review with meta-analysis: biologics and risk of infection or cancer in elderly patients with inflammatory bowel disease. *Aliment Pharmacol Ther.* 2020;51:820–830.
- Malham M, Jakobsen C, Paerregaard A, Virta LJ, Kolho K-L, Wewer V. The incidence of cancer and mortality in paediatric onset inflammatory bowel disease in Denmark and Finland during a 23-year period: a population-based study. *Aliment Pharmacol Ther.* 2019;50:33–39.
- Chu TPC, Grainge MJ, Card TR. The risk of venous thromboembolism during and after hospitalisation in patients with inflammatory bowel disease activity. *Aliment Pharmacol Ther.* 2018;48:1099–1108.
- Geary RB, Kamm MA, Hart AL, Bassett P, Gabe SM, Nightingale JM. Predictors for developing intestinal failure in patients with Crohn's disease. *J Gastroenterol Hepatol.* 2013;28:801–807.
- Current data [Internet]. Secure-IBD Database. <https://covidibd.org/current-data/>. Accessed April 7, 2020.
- An P, Ji M, Ren H, et al. Protection of 318 inflammatory bowel disease patients from the outbreak and rapid spread of COVID-19 infection in Wuhan, China. *SSRN Electron J [Internet]*. 2020. <https://doi.org/10.2139/ssrn.3543590>
- COVID-19 Crohn's disease or COVID-19 ulcerative colitis IOIBD [Internet]. <https://www.ioibd.org/ioibd-update-on-covid19-for-patients-with-crohns-disease-and-ulcerative-colitis/>. Accessed April 7, 2020.
- Fiorino G, Allocca M, Furfaro F, et al. Inflammatory bowel disease care in the COVID-19 pandemic era: the Humanitas, Milan experience. *J Crohns Colitis.* 2020. <https://doi.org/10.1093/ecco-jcc/jjaa058>

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Editorial: increasing IBD prevalence and its complications in the context of the COVID-19 pandemic. Authors' reply

Benson-Pope et al have highlighted the concerns that many patients with IBD, along with their medical teams, face during the coronavirus pandemic.¹ Immunosuppression has been the mainstay of moderate

to severe IBD management for decades. With large IBD populations around the world, the need to protect such potentially vulnerable patients from coronavirus disease 2019 (COVID-19) is vital.

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The novelty of COVID-19 has thrown up many challenges for the clinician, including how best to manage medications and what new onset symptoms may mean, given that COVID-19 can cause diarrhoea and abdominal pain, and that viral illnesses can lead to IBD flares.^{2,3} Although no evidence currently suggests that COVID-19 can induce flares in IBD, avoidance of COVID-19 in IBD, especially in those who are immunosuppressed or have active disease, is crucial. Benson-Pope et al, have highlighted the consensus statements from the International Organisation for the study of Inflammatory Bowel Disease (IOIBD) concerning IBD medication and COVID-19; however, a degree of disagreement exemplifies the lack of knowledge and a degree of uncertainty concerning how best to manage patients.⁴ Several national and international societies and charities have given advice on IBD and COVID-19 and many governments have been clear on the need for social distancing.⁵⁻⁸


Given the increasing prevalence of IBD, not only patients but also many healthcare professionals will be living with IBD.⁹ With health systems around the world coming under strain, adequate personal protective equipment may not always be readily available to healthcare professionals with IBD. With out-patient appointments and monitoring being postponed, IBD medical teams and patients must be alert to the evolving guidance and take all necessary precautions in the very different healthcare environment we now all work in.

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LINKED CONTENT

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REFERENCES

1. Benson-Pope SJ, Geary RB. Editorial: increasing IBD prevalence and its complications in the context of the COVID-19 pandemic. *Aliment Pharmacol Ther.* 2020;51:1441-1442.
2. Song Y, Liu P, Shi XL, et al. SARS-CoV-2 induced diarrhoea as onset symptom in patient with COVID-19. *Gut.* 2020;gutjnl-2020-320891. <https://doi.org/10.1136/gutjnl-2020-320891>
3. Rahier J-F, Papay P, Salleron J, et al. Influenza A (H1N1)v infection in patients with inflammatory bowel disease: a case series. *Aliment Pharmacol Ther.* 2011;33:499-500.
4. IOIBD update on COVID19 for patients with Crohn's disease and ulcerative colitis. 2020. <https://www.ioibd.org/ioibd-update-on-covid19-for-patients-with-crohns-disease-and-ulcerative-colitis/>. Accessed April 8, 2020.
5. Guidance on social distancing for everyone in the UK. <https://www.gov.uk/government/publications/covid-19-guidance-on-social-distancing-and-for-vulnerable-people/guidance-on-social-distancing-for-everyone-in-the-uk-and-protecting-older-people-and-vulnerable-adults>. Accessed April 8, 2020.
6. Unite against COVID-19; vulnerable people. <https://covid19.govt.nz/individuals-and-households/health-and-wellbeing/vulnerable-people/>. Accessed April 8, 2020.
7. BSG expanded consensus advice for the management of IBD during the COVID-19 pandemic. 2020. <https://www.bsg.org.uk/covid-19-advice/bsg-advice-for-management-of-inflammatory-bowel-diseases-during-the-covid-19-pandemic/>. Accessed April 8, 2020.
8. New guidance for people with Crohn's and colitis on level of risk of complications from COVID-19, and what you should do as a result. 2020. <https://www.crohnsandcolitis.org.uk/news/advice-for-people-with-crohns-and-colitis-self-isolation-social-distancing>. Accessed April 8, 2020.
9. King D, Reulen RC, Thomas T, et al. Changing patterns in the epidemiology and outcomes of inflammatory bowel disease in the United Kingdom: 2000-2018. *Aliment Pharmacol Ther.* 2020;51:922-934.