

Symposium

218



Current Challenges of Inflammatory Bowel Disease

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Abstracts

Poster Abstracts

Abstracts of Invited Lectures
Poster Abstracts

Symposium 218

**CURRENT CHALLENGES OF
INFLAMMATORY BOWEL DISEASE**



Mexico City, Mexico
March 6 – 7, 2020

Scientific Organization:

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Cross-sectional study using real world data on the active detection of patients with inflammatory bowel disease in Kazakhstan

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Introduction: Currently there is no registry of patients with inflammatory bowel disease (IBD) in Kazakhstan. According to official statistics for the year 2017, the prevalence of Crohn's Disease (CD) was 6.3 per 100,000 and that of ulcerative colitis (UC) was 31.5 per 100,000.

The purpose of this study was to actively identify the prevalence of IBD among the adult population of Kazakhstan.

Methods: This study undertook active identification of cases of IBD among the adult population of Kazakhstan using the 8-item CalproQuest questionnaire (Hasler S et al.). If positive IBD symptoms were elicited by the questionnaire, the respondent underwent fecal calprotectin (FC) testing by a semiquantitative method (PreventID® CalDetect® 50/200). If FC was elevated, further clinical assessment was carried out by an IBD specialist. Eligible subjects were men and women aged 18 and over.

Results: A total of 115,556 questionnaires were distributed (response rates was 86.5%, mean age 44.2 ± 15.1 years), of which 1084 (1.08%) reported symptoms concerning for IBD. Of these, 181 of them had a positive express analysis of FC, and 128 of 181 were confirmed to have IBD (36 CD and 92 UC). Among the original sample, the prevalence of IBD was 110.8 per 100,000, including CD 31.2 per 100,000 and UC 79.6 per 100,000. The prevalence of CD was 21.6 per 100,000 among males vs. females 36.6 per 100,000 and for UC 107.9 and 63.6 per 100,000, respectively. The average age of patients with CD was 39.4 ± 14.8 years, and with UC was 41.6 ± 15.7 years.

Discussion/Conclusion: Kazakhstan holds an intermediate position between East and West Asia, with diet and lifestyle traditions similar to other Central Asian countries. Therefore, the epidemiology of IBD in Kazakhstan can be used as a proxy its prevalence throughout Central Asia.