Inflammatory bowel diseases: Nutritional status and its significance for the course of the disease

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**Aim:** The aim of the study was to evaluate the association between the Body Mass Index (BMI) and the disease course of IBD patients.

**Introduction:** Inflammatory Bowel Disease (IBD) may lead to the underweight and malnutrition. However, the number of overweight and obese patients increases. Excess body weight connected with a pro-inflammatory state can modify the disease course.

**Methods:** Medical records from the University Hospital in Cracow Electronic System were screened from August 01, 2015 to December 31, 2016 in search of patients diagnosed with IBD. Data regarding the disease extension, occurrence of intestinal and extra-intestinal complications, number of days spent in the hospital annually and type of treatment was collected. The results were analyzed in the groups based on BMI (1 < 18.5; 2:18.5–25; 3 > 25 kg/m²).

**Results:** 150 patients with Crohn’s disease (CD) and 151 with ulcerative colitis (UC) were included. The median number of days spent in the hospital annually was significantly higher in the underweight group (13(IQR:11) vs 7(IQR:17) vs 7(IQR:12); p < 0.01). Overweight patients were less likely to receive anti-TNF or immunosuppressive treatment [anti-TNF (1:35% vs 2:38.36% vs 3:18.29%; 1 vs 3: p = 0.02; 2 vs 3: p < 0.01); immunosuppressive (1:40.00% vs 2:23.17%; p = 0.03)]. Patients with BMI > 25 kg/m² developed fistulas and bowel strictures less often [fistulas (1:33.33% vs 2:27.04% vs 3:12.20%; 1 vs 3: p < 0.01; 2 vs 3: p < 0.01); strictures (1:25% vs 2:22, 64% vs 9.76%; 1 vs 3: p = 0.01; 2 vs 3: p < 0.01)]. Underweight UC patients had more extensive disease [left sided (1:25% vs 2:52.63% vs 3:49.02%; 1 vs 2: p = 0.02; 1 vs 3: p > 0.04); pancolitis (1:58.33% vs 2:26.32% vs 3:31.37%; 1 vs 2: p < 0.01; 1 vs 3: p = 0.02)].

**Conclusion:** Overweight seems to be associated with a milder clinical course of the disease in IBD patients. It is related to lower incidence of intestinal complications among CD and to less extensive intestine involvement in UC patients.

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Influence of glicoregulation and chronic degenerative complications of diabetes on bone mineral density

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**Aim:** The aim of this study is to determine the correlation between duration of diabetes, glicoregulation and chronic degenerative complications of diabetes, on one side, and bone mineral density, on the other side.

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