A positive correlation between length of bowel resected and risk of BAM would improve the consenting process for surgery. Patients would be better informed about the risks of BAM diarrhoea post-surgery and guide treatment options.

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Prevalence of extraintestinal manifestations in paediatric patients with Inflammatory Bowel Disease: Results from the Swiss IBD Cohort Study

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Background: There is a paucity of data from large cohort studies on the prevalence and type of extraintestinal manifestations in pediatric patients with Crohn's disease (CD) and ulcerative colitis (UC). We aimed to assess the prevalence and type of EIM in pediatric patients with inflammatory bowel disease (IBD).

Methods: Data from patients enrolled in the Pediatric Swiss IBD Cohort Study (P-SIBDCS) were analyzed. Since 2008 the P-SIBDCS collects data on patients aged 2-17 from hospitals and private practices across Switzerland. Results of continuous data are reported as median and interquartile range.

Results: A total of 266 pediatric IBD patients were recruited (146 [54.9%] with CD, 63% boys, median [interquartile] age at diagnosis 12 [9.9-13.6] years, median age at enrollment 13.6 [11.7-15.3] years, median disease duration 3.3 [1.6-4.9] years, and 120 [45.1%] with UC, 47.5% boys, median age at diagnosis 11.5 [8.2-13.6] years, median age at enrollment 13.5 [10.9-15.3] years, median disease duration 3.2 [1.6-5.7] years. A total of 90 patients (33.8%) suffered from one to a maximum of three EIM during their disease course (74/90 patients [82.2%] had one EIM, 14/90 patients [15.6%] had two EIM, and 2/90 patients [2.2%] suffered from three EIM. EIM were more frequently observed in CD patients (61/146, 41.8%) when compared to UC patients (29/120, 242%, p < 0.001). The following types of EIM were observed: 37/266 (13.9%) peripheral arthritis / arthralgia (17.8% in CD vs. 9.2% in UC); 5/266 (1.9%) uveitis / iritis (2.7% in CD vs. 0.8% in UC; 26/266 (9.8%) oral aphthous ulcers (12.3% in CD vs. 6.7% in UC); 2/266 (0.8%) ankylosing spondylitis (0.7% in CD vs. 0.9% in UC); 5/266 (1.9%) erythema nodosum (2.7% in CD vs. 0.8% in UC); 2/266 (0.8%) pyoderma gangrenosum (0.7% in CD vs. 0.8% in UC).

Conclusions: EIM appear in pediatric IBD patients in similar prevalence when compared to the adult population. As a general rule, EIM are more frequently observed in pediatric CD patients when compared to pediatric UC patients. The most frequent EIM are peripheral arthritis / arthralgia, followed by oral aphthous ulcers.

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Performance of Tuberculin skin test in routine screening for latent tuberculosis infection in patients with inflammatory bowel diseases

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Background: Screening for latent tuberculosis infection (LTBI) before starting therapy with anti tumor necrosis factor (anti-TNF) antibodies has decreased the risk of active tuberculosis. Corticosteroids (CS) or immunosuppressive (IS) therapy may affect the performance of the Tuberculin skin test (TST). The aim of this study was to determine the likelihood of detecting LTBI using a 2-step TST in two cohorts of patients with inflammatory bowel diseases: candidates and non-candidates for anti-TNF therapy. We also analyzed factors associated with the performance of the TST.

Methods: This prospective multicenter case-control study included 240 consecutive patients selected for anti-TNF therapy and 326 controls. LTBI risk factors were recorded and patients underwent chest X-ray and 2-step TST. TST was considered positive if induration was ≥ 5 mm in the first or the second (booster) test. Factors associated with TST Results were analyzed by logistic regression.

Results: Ninety-three of 566 patients (16.4%) had a positive TST (21/93 [22.6%] in the second test). Twenty-three of 240 (9.6%) patients in the anti-TNF group and 70 of 326 (21.5%) in the control group had a positive TST (odds ratio [OR] 0.39; 95% confidence interval [CI] 0.23-0.64; p<0.001). The proportion of Crohn´s disease patients was higher in the anti-TNF group (169/240 [70.7%] vs. 180/326 [56.3%]; p=0.002). More anti-TNF group patients were receiving CS therapy (37.6% vs.