AGE PROFILE OF CHILDREN AND ADOLESCENTS
DIAGNOSED WITH INFLAMMATORY BOWEL DISEASE IN
UNIVERSITY HOSPITAL LIMERICK OVER A 5 YEAR TIME
PERIOD, 2014–2018

Kerrie Henning*, Sarfaraz Janjua, Michael Mahony. UHL, Limerick, Ireland

Aim To investigate if there are any trends in the age at diagnosis of Inflammatory Bowel Disease (IBD) patients who attend the Paediatric Department at University Hospital Limerick.

Method Using our database of IBD patients, we analysed the charts of those diagnosed between Jan 1st 2014 and Dec 31st 2018. We extracted their date of birth, date of diagnosis, whether they were diagnosed with Ulcerative Colitis (UC) or Crohn’s Disease (CD) and tabulated the results using Excel.

Results Over the time-period studied, in total 41 children and adolescents were diagnosed with IBD (59% CD, 41% UC). After stratifying by year there was no clear increase or decrease in the number of diagnoses per year from 2014 to 2018. The average age at diagnosis of IBD across this time period was 10.7 years (Range 2–16 years) and the average number of patients diagnosed per year was 8 (Range 5–11 patients per year).

When looking separately at those diagnosed with CD, the average age of diagnosis across our 5-year time period was 10.48y (Range 2y-16y). When looking at those diagnosed with UC, the average age of diagnosis across our 5-year time period was 11.73y (Range 4y-16y).

We analysed the age at diagnosis of both CD and UC by year in order to assess if there were any trends in age of diagnosis. For CD, the average age of diagnoses are as follows: 2014; 10y (range 7y to 12y), 2015; 11.4y (range 9y to 15y), 2016; 13y (range 11y to 15y), 2017; 11.25y (4y to 16y), 2018 6.75y (2y to 11y). For UC, the average age of diagnosis across our 5-year time period was 11.73y (Range 4y-16y).

We then looked at trends in ‘Very Early Onset IBD’ (VEO IBD) patients, which are classified as those <6 years of age at diagnosis (1) and found that there has been a significant increase in those diagnosed with IBD in this age group during the period 2014–2018. In 2015 there was one VEO IBD diagnosis (UC). In 2017 there were two VEO IBD diagnoses and both were CD. Similarly, in 2018, there were two further VEO IBD diagnoses and again both were CD.

Discussion The average age at diagnosis remains relatively unchanged across the years with no obvious trend in either direction, however when analysing the subgroup of VEO IBD diagnoses, it is clear that for CD specifically there has been an increase in the number of children diagnosed under the age of 6, with there being zero VEO IBD diagnoses from 2014–2016 and two per year in 2017 and 2018.

REFERENCE