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STEROID USE AND DEPENDENCY IN SOUTH INDIAN IBD PATIENTS - A MULTI-CENTER CLINICAL AUDIT

Society: AGA**Track:** Inflammatory Bowel Diseases**Author(s) and Affiliation(s):**Shiran Shetty¹, PRAVEEN C S MANDAPATI¹, Jimmy K Limdi², Anish kuriakose kuzhiyanjal², Balaji Musunuri¹

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BACKGROUND: Corticosteroids are effective induction agents for inflammatory bowel disease (IBD) but are ineffective for maintenance. Their judicious use and steroid-sparing strategies are advocated by societal guidelines, but data from India are scarce.

AIM: To assess steroid use in Karnataka, Southern India and assess factors associated with excess exposure.

METHODS: An audit of steroid use in the last 12 months was conducted in unselected IBD outpatients from 4 large centres in South India using the steroid assessment tool ⁽¹⁾. Cases that met the ECCO criteria for steroid dependency or excess were assessed to see whether steroid prescriptions were definitely avoidable, probably avoidable or unavoidable ⁽²⁾. Categorical data were reported in proportions. Chi-square and Fischer test (expected count <5) was used to assess the association of factors associated with outcomes. Statistical significance was determined at 5% level of significance.

RESULTS: Of 400 patients (61% male) enrolled in the study, 279 (70%) patients had ulcerative colitis (UC) and 121 (30%) patients had Crohn's disease (CD). Baseline characteristics are outlined in (Table 1). Among these, steroids were given to 208 (52%) IBD patients, and 127 (32%) patients were identified as having steroid excess or dependence: 84 (66%) with UC and 43 (34%) with CD. CD patients with mild-inactive disease tended to have more steroid dependency ($p < 0.001$), although rates of steroid use ($P = 0.123$) and dependency were similar in overall CD (35.5%) and UC (30%) patients. Inappropriate "steroid excess" was noted in 48% of IBD patients (UC (52%) and CD (40%)) ($p = 0.226$) (Fig. 1). The annual incidence of inappropriate steroid excess was 15.25 % (Percentage of inappropriate excess to the total cohort). Notably, 12.5% ($n = 26$) patients commenced steroids without any biochemical or endoscopic evaluation and 128 (61%) patients did not receive any concomitant bone protection

CONCLUSION: - In this first study from India, steroid dependency or excess was observed in 32% of IBD patients with inappropriate steroid excess seen in 15.2%. Despite limitations posed by cost, access and logistical challenges, these observations are sobering and have triggered a quality improvement programme to improve quality of care for our patients.

REFERENCES:

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