

Disease Burden and Unmet Medical Need in Patients With Ulcerative Colitis in Greece: A Cross-Sectional Patient Survey

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OBJECTIVE

Ulcerative colitis (UC) requires life-long disease management. The study objective was to investigate the burden of UC and unmet medical need in patients who receive advanced (biologic or JAK inhibitor) therapy in Greece

CONCLUSIONS

Despite the use of biologic/JAK therapies, this real-world analysis reveals that the disease burden is very high in UC, with poor quality of life as well as increased work impairment, depression, and disease activity in Greek patients. There is an increasing need to incorporate assessments of patient-reported outcomes into treatment decision making and estimates of health outcome

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INTRODUCTION

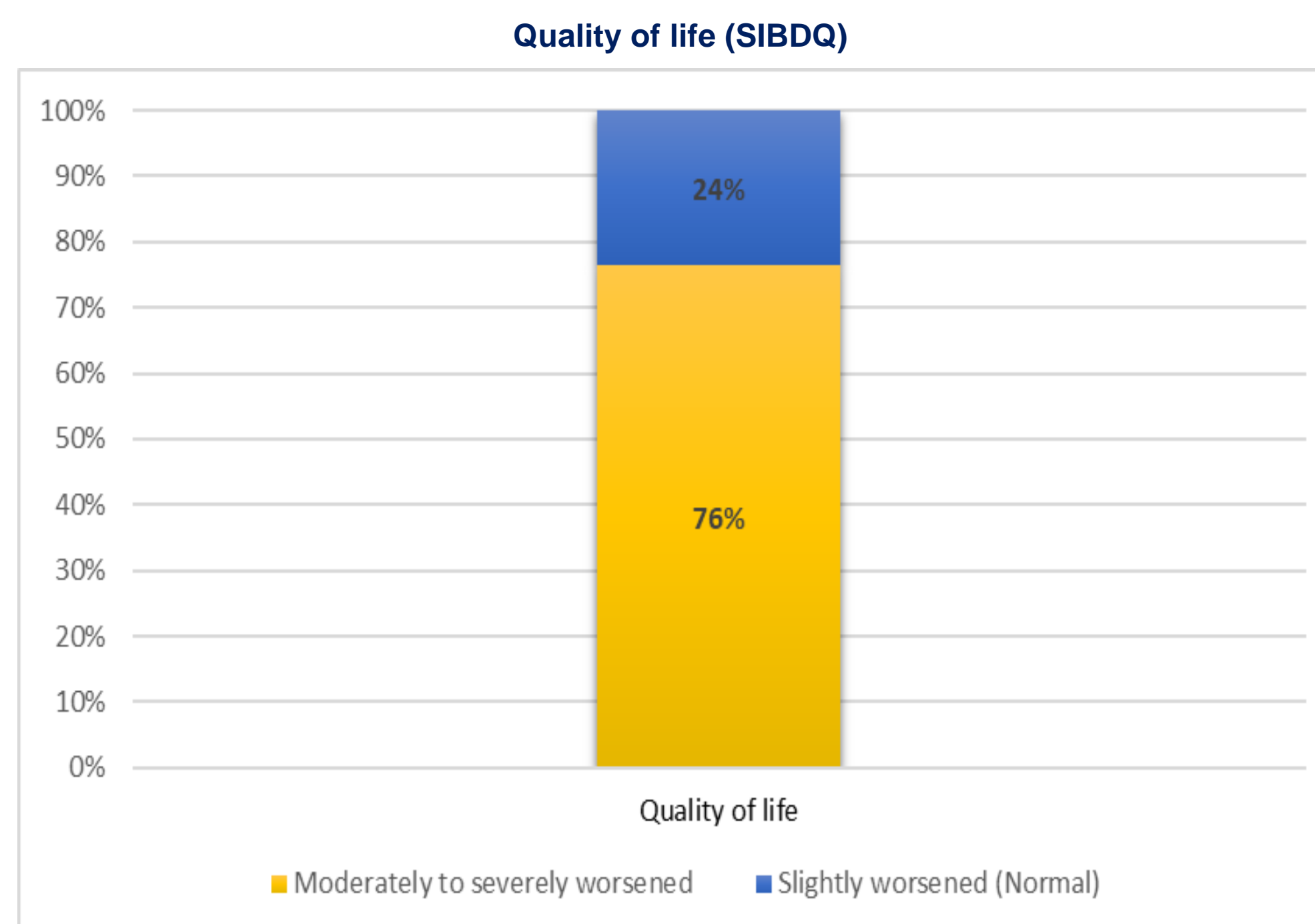
- The burden of Ulcerative Colitis (UC) extends far beyond the clinical signs and symptoms from the gastrointestinal tract and/or comorbidities, since many other aspects of patients' lives are affected¹
- Patient-reported outcomes [PROs] are becoming important endpoints in clinical trials in the field of inflammatory bowel diseases (IBD)² and have been selected as treatment targets by an expert group of IBD specialists³⁻⁵
- Physicians often underestimate the disease burden and associated suffering⁶, while they may fail to recognize issues important to patients⁷
- In a recent Greek survey authors have estimated that nearly 4 in 5 patients found their UC to be mentally exhausting, even among patients with milder disease or those who self-reported to be in remission⁸

METHODS

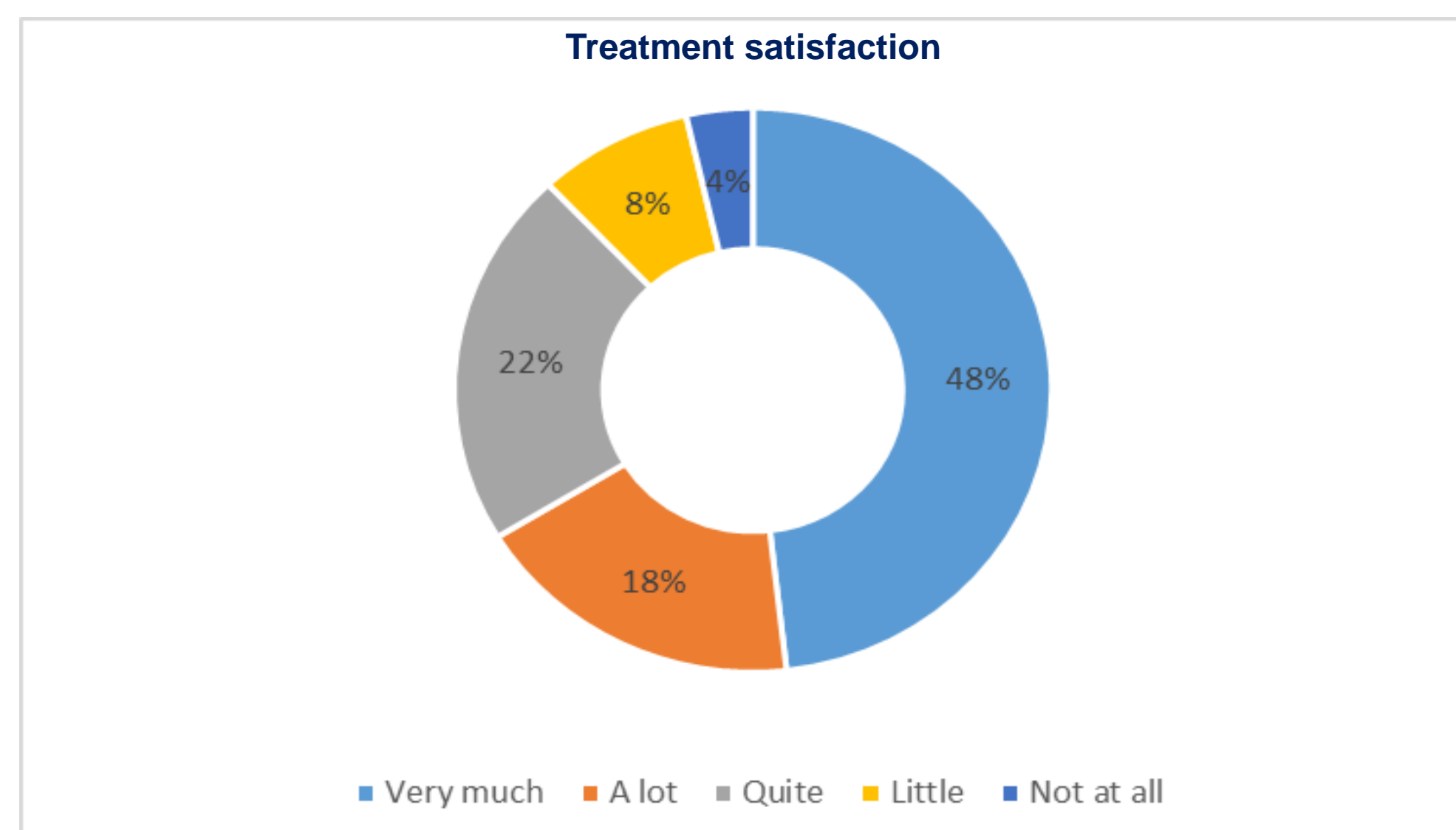
- Between October 2023 and January 2024, adult patients who were members of Hellenic Society of Crohn's disease's and Ulcerative Colitis' patients (HELLESCC) filled out a structured self-questionnaire
- The survey questionnaire included sociodemographic characteristics, smoking habits, history of comorbidities, disease characteristics, IBD medications, and PROs (Short Inflammatory Bowel Disease Questionnaire [SIBDQ], Work Productivity and Activity Impairment-Specific Health Problem [WPAI-SHP], Patient Health Questionnaire-9 [PHQ-9], treatment satisfaction and treatment adherence)
- The recruitment process was performed by HELLESCC staff, without recording members' personal data. The participation in the cross-sectional survey was voluntary. Participants were able to withdraw their consensus at any time. Collected data were anonymous and confidential

RESULTS

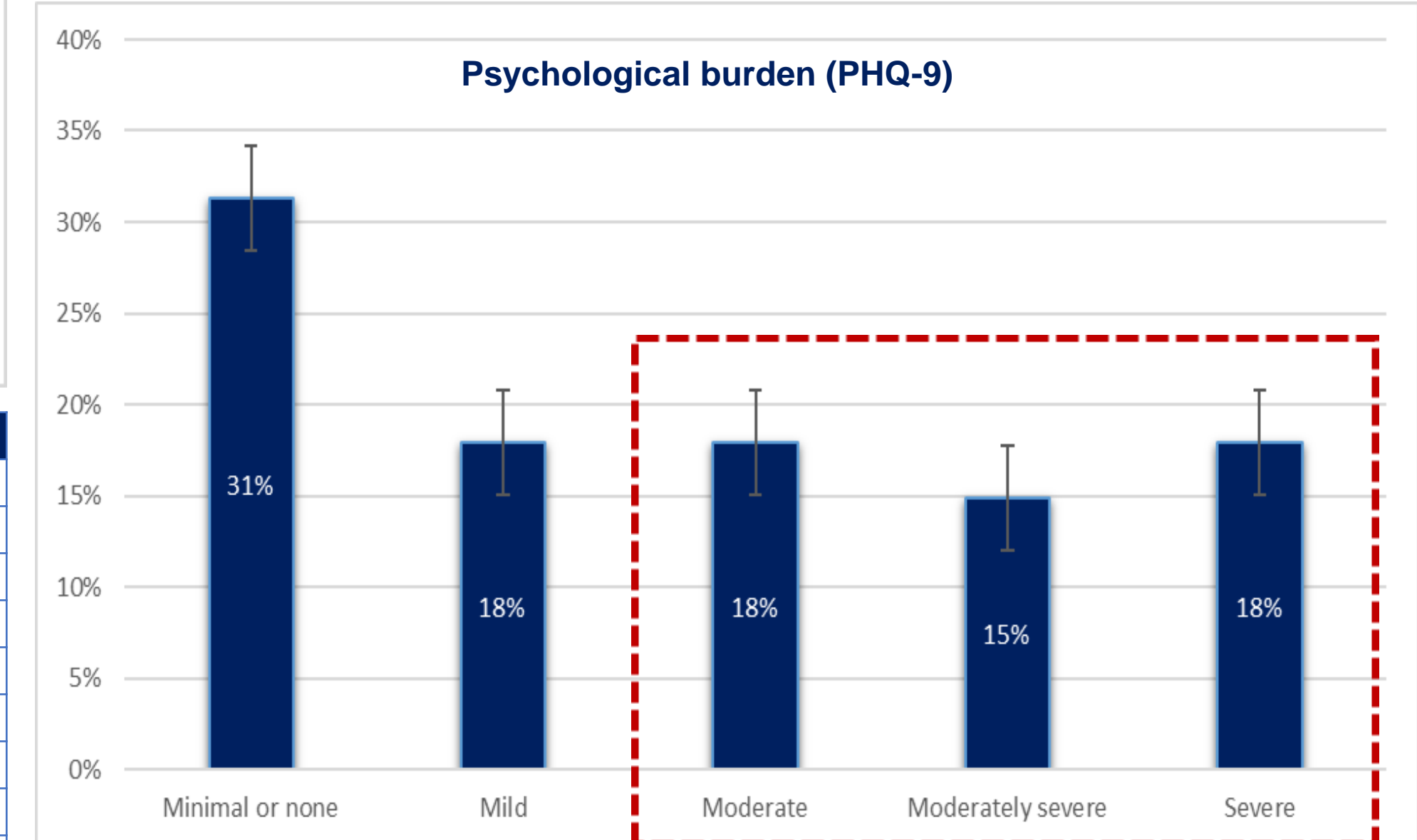
Patients Characteristics		N=86
Age [years] median (IQR)		
		42 (35-50)
Gender, n (%)		
	Male	40 (46.5)
	Female	46 (53.5)
Residence, n (%)		
	Athens	41 (47.7)
	Thessaloniki	2 (2.3)
	Urban area (>10,000 inhabitants)	28 (32.6)
	Semi-urban area (2,000 - 10,000 inhabitants)	12 (14)
	Rural area (<2,000 inhabitants)	3 (3.5)
Body mass index [BMI], n (%)		
	Underweight (<18.5)	2 (2.3)
	Normal weight (18.5-<25)	33 (38.4)
	Overweight (25-30)	31 (36)
	Obese (≥30)	20 (23.3)
Family status, n (%)		
		N=65
	Unmarried	26 (40)
	Married	36 (55.4)
	Divorced	2 (3.1)
	Widow	1 (1.5)
Education level, n (%)		
		N=65
	Primary school	1 (1.5)
	Low Secondary school	1 (1.5)
	High Secondary school	21 (32.3)
	University	30 (46.2)
	MSc/ PhD	12 (18.5)
Occupational status, n (%)		
		N=65
	Freelancer	5 (7.7)
	in paid employment	32 (49.2)
	Unemployed	6 (9.2)
	Retired	13 (20)
	Student	5 (7.7)
	Housework	3 (4.6)
	Other	1 (1.5)
Smoking status, n (%)		
	Current smoker	18 (20.9)
	Former smoker	30 (34.9)
	Never smoker	38 (44.2)
Age at diagnosis [years], median (IQR)		
		30 (22-39)
Disease duration [years], median (IQR)		
		11 (6-16)
Surgery during the last 12 months, n (%)		
		5 (7.8)
Ongoing advanced treatment, n (%)		
	Tumor necrosis factor inhibitors [TNFi]	46 (53.5)
	Integrin α4 inhibitor	18 (20.9)
	Interleukin-12/23 inhibitor [IL-12/23i]	13 (15.1)
	Janus kinase inhibitors [JAKi]	9 (10.5)
Disease activity, n (%)		
		N=86
	Remission	36 (41.9)
	Mild	26 (30.2)
	Moderate	23 (26.7)
	Severe	1 (1.2)
Comorbidities, n (%)		
		N=63
	None	23 (36.5)
	One	12 (19)
	Two	12 (19)
	Three or more	16 (25.4)
Comorbidities		
		N=40
Conditions, n (%)		
	Chronic obstructive pulmonary disease	1 (2.5)
	Arthritis	15 (37.5)
	Iron deficiency anaemia	8 (20)
	Hypothyroidism	6 (15)
	Skin allergies or other skin conditions	8 (20)
	Depression	13 (32.5)
	Diabetes	5 (12.5)
	Hypertension	7 (17.5)
	Cardiovascular disease	7 (17.5)
	Osteoporosis	7 (17.5)
	Migraine or severe headache	6 (15)
	Other	12 (30)



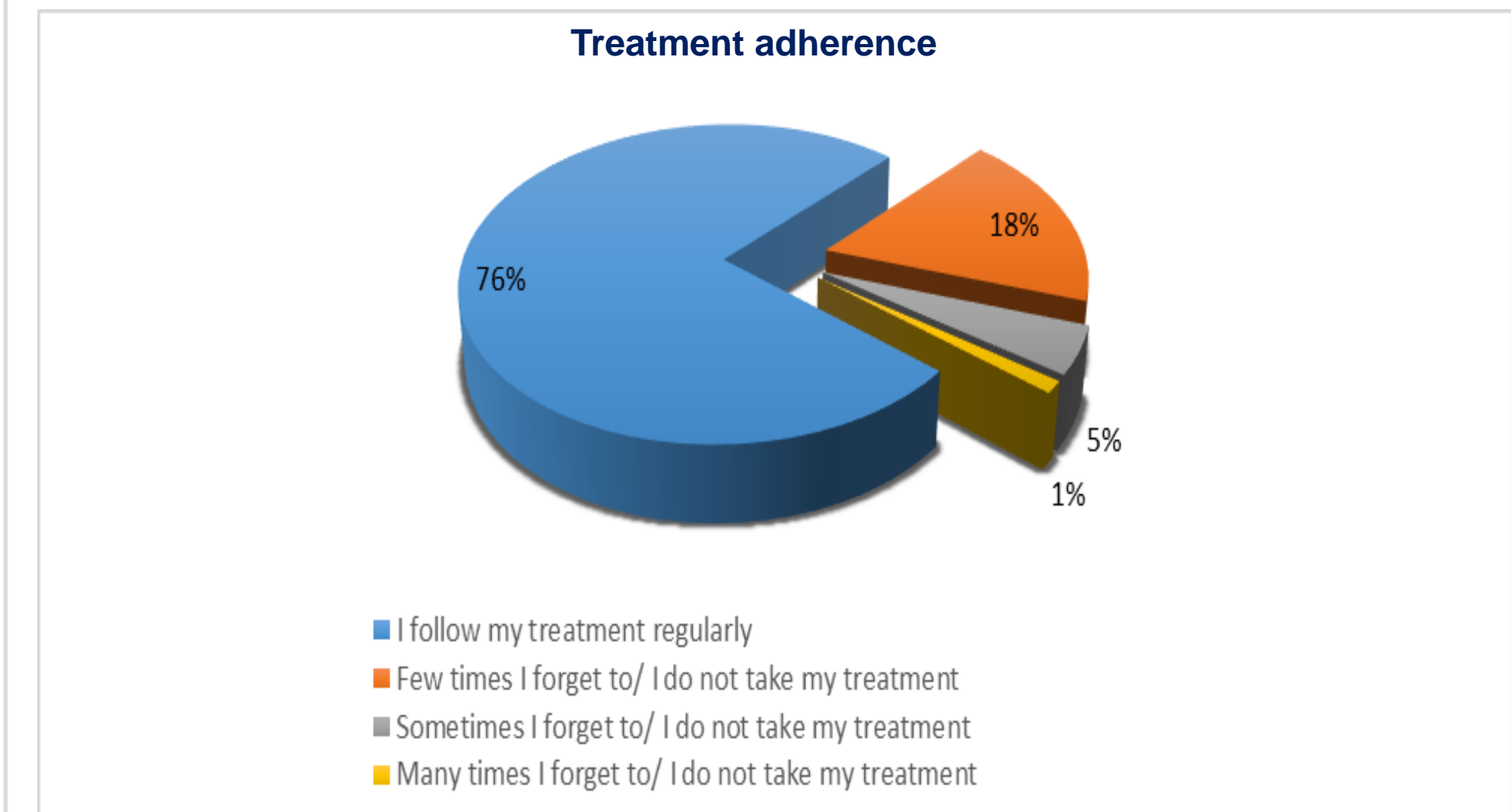
Productivity loss		WPAI	
Absenteeism in %, median (IQR)			
	Mild (0-19%)	31 (79.5)	0 (0-6.3)
	Moderate (20-49%)	5 (12.8)	
	Severe (≥50%)	3 (7.7)	
Presenteeism in %, median (IQR)			
	Mild (0-19%)	21 (58.3)	10 (0-50)
	Moderate (20-49%)	5 (13.9)	
	Severe (≥50%)	10 (27.8)	
Work productivity loss in %, median (IQR)			
	Mild (0-19%)	21 (53.8)	10 (0-67.4)
	Moderate (20-49%)	4 (10.3)	
	Severe (≥50%)	14 (35.9)	
Activity impairment in %, median (IQR)			
	Mild (0-19%)	30 (0-70)	23 (34.3)
	Moderate (20-49%)	14 (20.9)	
	Severe (≥50%)	30 (44.8)	



- Around 76% of patients (N=72) reported moderately [SIBDQ 45-59: 36.1%] to severely [SIBDQ <45: 40.3%] impaired quality of life (half of them were in remission)
- One-tenth reported work productivity loss and 30% reported activity impairment
- Around half of patients (N=67) reported moderate to severe depressive symptoms [PHQ-9≥10: 50.7%]



- One-third (34%) of patients (N=83) were "not at all", "little" or "quite" satisfied with their biological/JAK treatment, with the main reason of dissatisfaction being "I still have frequent flares"
- One-fourth (24%) of patients (N=83) reported reduced adherence



Spearman's correlation coefficients for PROs and disease activity

Outcome	Disease Activity (SCCAI)	Quality of life (SIBDQ)	Productivity loss (WPAI)				Psychological burden (PHQ-9)
			Absenteeism	Presenteeism	Overall productivity impairment	Activity Impairment	
Disease Activity (SCCAI)	--	--					
Quality of life (SIBDQ)	-0.663**	--					
Productivity loss (WPAI)	Absenteeism	0.503**	-0.523**	--			
	Presenteeism	0.704**	-0.765**	0.402*	--		
	Overall productivity impairment	0.723**	-0.784**	0.690**	0.984**	--	
	Activity Impairment	0.612**	-0.783**	0.340*	0.763**	0.719**	--
Psychological burden (PHQ-9)	0.496**	-0.834**	0.372*	0.675**	0.670**	0.659**	--

*p < 0.05. **p < 0.01