

Delaying surgery for IBD patients may have grave consequences

When discussing a proposed therapy for any illness, patients undoubtedly, and understandably, want to know the side effects. This includes the most serious side effect – the risk of death. The Inflammatory Bowel Diseases (IBD), comprised of Crohn's disease and ulcerative colitis, are increasing in prevalence throughout the world with the highest risk in North America and Europe . Patients with IBD are typically treated with a combination of chronic medications to control their symptoms and reduce the risk of forming complications, however, sometimes surgery is required to remove a portion of their diseased bowel. Both types of therapy – medical and surgical – have associated side effects and for surgery, this includes the risk of death.

Until now, doctors were unable to provide patients with accurate estimates at their risk of death, should they undergo a surgery remove a portion of their diseased bowel (ie. bowel resection). Our group from the University of Calgary, Division of Gastroenterology, performed a thorough medical literature search and analyzed the data to estimate the risk of death for patients with IBD following a bowel resection. We have determined:

Crohn's Disease patients:

- Patients who undergo electively planned, non-emergent bowel resection have a 0.6% risk of death
- Patients who undergo an un-planned, emergent bowel resection have a 3.6% risk of death
- The risk of death after surgery has decreased between 1990 and 2014
- The risk of death after surgery is similar whether your surgery took place in North America or Europe

Ulcerative Colitis patients:

- Patients who undergo electively planned, non-emergent bowel resection have a 0.7% risk of death
- Patients who undergo an un-planned, emergent bowel resection have a 5.3% risk of death
- The risk of death after surgery has not decreased between 1990 and 2014
- The risk of death after surgery is similar whether your surgery took place in North America or Europe

With our data, which has been published in the October 2015 issue of *Gastroenterology*, we are able to provide doctors and patients with valuable information for counseling and management planning when considering medical versus surgical treatment.

Publication

[Postoperative Mortality Among Patients With Inflammatory Bowel Diseases: A Systematic Review and Meta-analysis of Population-Based Studies.](#)

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