

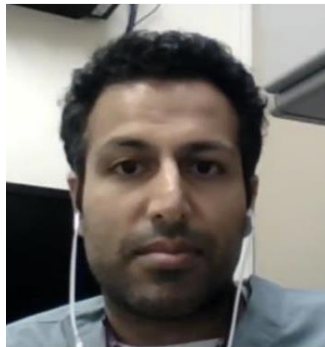
Re-examining scoring tools for Crohn's disease to improve prognosis and treatment

BACKGROUND:

Inflammatory bowel disease (IBD) is the name given to a group of conditions that affect the colon, small intestine, and other parts of the gastrointestinal (GI) system. The most commonly occurring are Crohn's disease and ulcerative colitis. These conditions appear consistently in populations worldwide, and while usually not fatal, can significantly affect quality of life and activities of daily living.

RESEARCHER QUESTION:

Dr. Neeraj Narula is an Associate Professor of Medicine and Staff Gastroenterologist at McMaster University in Hamilton, Ontario, Canada. His primary research focus is on IBD, and he describes



current management of associated symptoms as "somewhat trial and error." Much of Dr. Narula's work focuses on identifying specific patient characteristics that predict response to particular treatments, enabling a more personalized, efficient approach to management. For this study, Dr. Narula's team sought to determine the minimally clinically important reduction in key scores of disease severity from baseline to post-induction endoscopy that can predict mucosal healing at week 52, an important indicator for people with Crohn's disease.

"Vivli's wealth of data provided an invaluable resource for our research." - Dr. Neeraj Narula

FINDINGS

Key findings from this research indicate that people with Crohn's disease who had a significant reduction in endoscopic inflammation after starting treatment were more likely to be in endoscopic remission one year later. Researchers also found that combining the assessment of different parts of the colon can be as accurate as the current method of scoring the endoscopic severity of Crohn's disease, and that assessing features other than ulceration does not significantly affect the accuracy of the scores.

IMPACT

The research project has produced two publications, in the Journal of Crohn's and Colitis, and in Journal of the Canadian Association of Gastroenterology.

Additionally, Dr. Narula indicated in a conversation with Vivli that the team's research findings can help inform future clinical trials, guiding more efficient study design by highlighting potentially significant predictors of treatment response. He also noted that these findings can immediately help clinicians make more informed decisions about treatment plans, ultimately benefiting IBD patients.

RESEARCH PROCESS:

To answer the question of whether the Modified Multiplier SES-CD (MM-SES-CD) could effectively predict endoscopic remission in Crohn's disease, the research team requested access to six studies, and assessed data from 279 participants relevant to endoscopic remission (ER-1) of the colon. Dr. Narula noted that access to data through Vivli allowed the team to analyze a larger patient population and a wider variety of treatments than would have been feasible in a standard clinical setting.

NEXT STEPS:

READ MORE

[Early Reduction in MM-SES-CD Score After Initiation of Biologic Therapy is Highly Specific for 1-year Endoscopic Remission in Moderate to Severe Crohn's Disease](#) (JCC)

[A116 Optimizing Crohn's Disease Endoscopic Scoring Operating Characteristics To Assist With The Advent Of Artificial Intelligence](#) (JCAG)

[Find out more about requesting data from Vivli.](#)