

Clinical and Socio-demographic Characteristics of Inflammatory Bowel Disease Patients in Gaza: A Cross-Sectional Descriptive Study

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Abstract

Background: The global incidence of Inflammatory Bowel Disease (IBD), Ulcerative Colitis (UC) and Crohn's Disease (CD), is in the rise. Despite the presence of some international studies that described the different patterns and characteristics of IBD, still however, we don't have a national epidemiological or descriptive data especially in Gaza Strip. The aim of this study is to identify socio-demographic and clinical characteristics of IBD among patients with IBD in Gaza.

Keywords

Ulcerative Colitis • Crohn's Disease • Inflammatory Bowel Disease

Methods

A cross-sectional descriptive study was conducted on July 2019. We applied a questionnaire for patients who were diagnosed with IBD. We focused on the socio-demographic and clinical variables of each patient. We used SPSS Statistics V23.0 for data management and statistical analysis.

Findings

Sixty patients with IBD whose age ranged between 15 to 61 years were included in this study. Thirty-Eight of them (63%) are diagnosed with CD and 22 (37%) with UC. The mean age of patients with CD was 32 ± 11 years and 34 ± 12 for patients with UC. 58% of patients were male and 42% were female. The male/female distribution was 1.1:1 for CD and 2.1:1 for UC. 7% of patients live in North of Gaza, 56% live in Gaza City, 17% live in Middle Area, 12% live in Khanyounis and 9% live in Rafah. Twelve of patients were smokers, 24% of CD patients and 13% of UC patients. 24% (n=14) of patients had a family history of IBD, 32% of CD patients and 9% of UC patients. The most common first manifestation of CD and UC were diarrhea and abdominal pain. The report of appendectomy (5%) and palpable mass (5%) were unique to CD. 32% of patients with UC had rectal bleeding, compared to 5% of CD patients. Extra-intestinal manifestations (joint swelling and skin rash and itching) were present in 34% of patients with CD and 18% with UC. Most of CD and UC

patients were under treatment with different pharmacologic agents which includes 5-aminosalicylates (63% and 80% respectively), followed by thiopurines (68% and 50% respectively), steroids (45% and 31% respectively) and anti-TNF therapy (34% and 18% respectively). It is evident that 5-aminosalicylates remains as most preferred therapy probably due to their known anti-inflammatory property. On the other hand, non-pharmacologic therapy is well suited for the patients who are unable to tolerate the drug therapy. Use of whole grains, high fiber foods are found to have a moderate effect in increasing the bowel movements eventually treating the symptoms of IBD to a certain extent.

Interpretation

According to our findings, there was more family history of IBD among patients with CD, but it was not significant statistically. Moreover, CD patients were younger, had higher prevalence of smoking habits. Not only the smoking habit, it was found that other factors like diet also plays a vital role in causing IBD especially the fatty and spicy foods.

In most of the patients diagnosed with IBD are clinically found to have manifestations which include palpable mass, appendectomy and extra-intestinal complications. Abdominal pain was more prevalent on CD patients ($P < 0.03$). UC was more prevalent among older males, and they suffered from bloody diarrhea and rectal bleeding. The latter was statistically significant among patients with UC ($P < 0.006$). In addition, the severity of IBD symptoms are more severe on females ($p < 0.01$). There was no significant difference between patients with CD and UC as for education background, marital status or place of residence.

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Conflict of Interest

The authors declared no conflicts of interest with respect to the authorship and/or publication of this article.

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