

# 3rd IBDHORIZONS UPDATES FOR APP



IBDH

King Street Ballroom, October 29, 202



# KEEPING PATIENTS WELL ON THERAPY: IBD HEALTH MAINTENANCE



# ARS QUESTION 1

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Which of the following is a **NOT** treat-to-target goal in Crohn's Disease based on STRIDE II recommendations:

- A. Endoscopic mucosal healing
- B. Symptomatic resolution (diarrhea & abdominal pain)
- C. Normalization of the CRP
- D. Resolution of fatigue and anxiety

# ARS QUESTION 2

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Live vaccines are contraindicated for patient when on the following therapy?

- A. Prednisone 25mg daily
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- C. Mesalamine 4.8gm daily
- D. All of the above

# CLINICAL CASE 3



20-year-old with Crohn's disease reports poor sleep and fatigue on Ustekinumab. Most recent labs and colonoscopy are normal. You are discussing the current symptoms and reviewing health maintenance plans with the patient.



# Keeping Patients Well on Therapy: IBD Health Maintenance

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Kendra J Kamp, PhD, MS, RN



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## **KENDRA KAMP**

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Her passion is to improve the lives of individuals with gastrointestinal diseases.

Kendra plans to expand her program of research to develop interventions aimed at improving self-management of individuals living with ulcerative colitis and Crohn's disease.

# DISCLOSURES

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- No relevant financial relationships to disclose

# Vaccinations

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## All IBD patients

- Recommend age-appropriate vaccination

## Patients on immunosuppression

- Recommend additional vaccination due to increased risk of infection
- Avoid live vaccines



# Vaccinations for all IBD patients

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- Annual inactivated influenza vaccine
- COVID-19 boosters, follow current guidelines
- Meningococcal vaccination, adolescents, college students, military
- HPV, ages 11-26 (consider up to age 45)
- Hepatitis A and B, all non-immune patients
- Tdap, every 10 years

# Vaccinations for patients on immunosuppressive therapy

Immunosuppressive therapy is:

- prednisone (>20 mg/day for more than 14 days)
- azathioprine (>2.5 mg/kg/day)
- mercaptopurine (>1.5 mg/kg/day)
- methotrexate (>0.4 mg/kg/week)
- cyclosporine, tacrolimus
- biologic agents (infliximab, adalimumab, golimumab, certolizumab, ustekinumab)
- small molecules (tofacitinib, upadacitinib, ozanimod)

Syal et al., 2021

# Vaccinations for patients on immunosuppressive therapy

- Pneumococcal vaccination, in accordance with national guidelines
  - PCV13 first (Prevnar 13), PPSV23 (Pneumovax23) at least 8 weeks later
  - PCV20 (Prevnar 20), one dose
- Varicella vaccination (LIVE) with 2-dose series at least 4 weeks before initiation of immunosuppressive therapy
- Herpes zoster vaccination for adults with IBD over the age of 50 and patients receiving immunosuppressive therapy
  - Vaccination with Shingrix
- **Avoid live vaccines while on immunosuppressive therapy: MMR, varicella, Zostavax (shingles), influenza nasal spray, rotavirus, some travel vaccines (e.g., yellow fever, oral typhoid)**

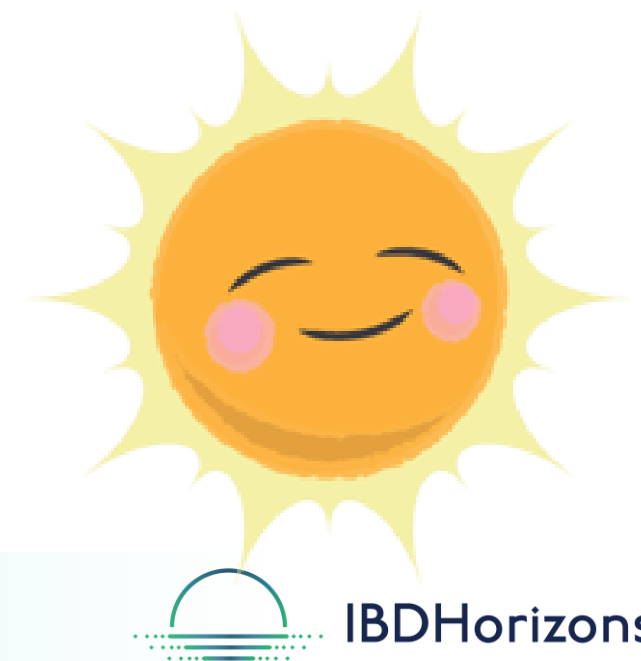
# Non-IBD-related cancer screening

**Cervical cancer screening:** yearly Pap smear when treated with systemic immunosuppression, starting at age 21

**Skin cancer screening:** yearly total body skin exams, especially when treated with systemic immunosuppression

- *Sun protection recommendations*
  - Sunscreen: UVA and UVB
  - Sun protective clothing
  - No tanning beds

<https://spaceplace.nasa.gov/all-about-the-sun/en/>



# Bone health in IBD

Osteoporosis prevalence in IBD: 14-42%

Screen with DEXA scan if any osteoporosis risk factors present:

- Low BMI
- >3 months cumulative steroid exposure
- Smoker
- Post-menopausal
- Hypogonadism

If normal, repeat in 5 years

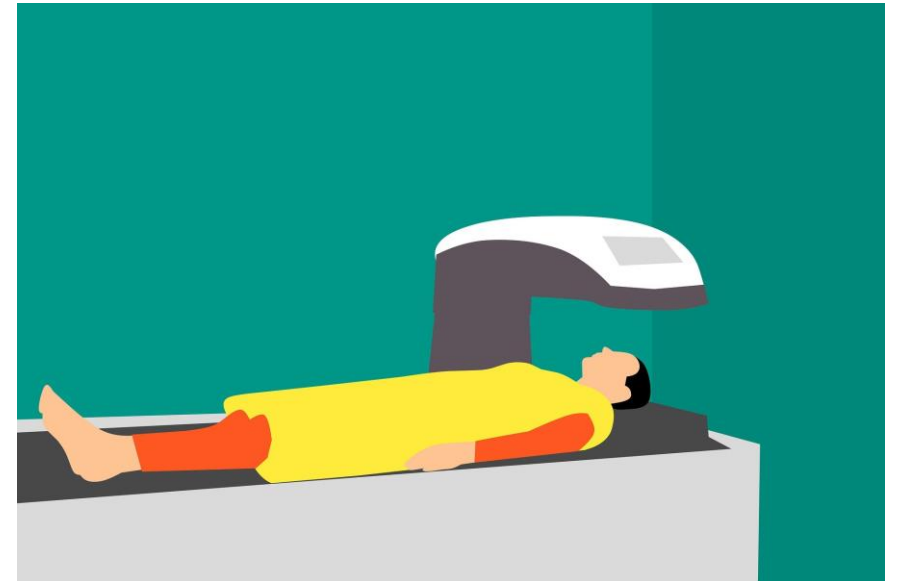
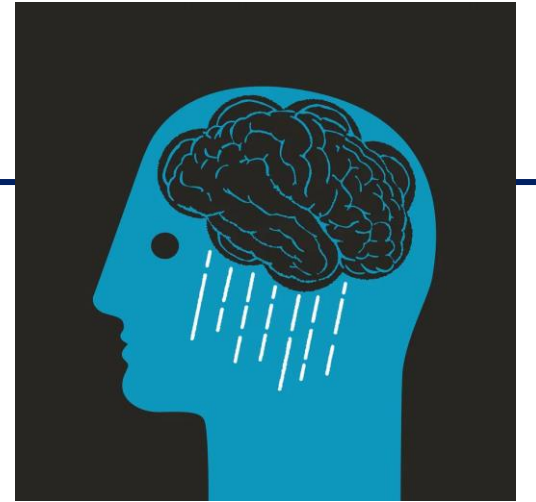


Image: <https://www.crownvalleyimaging.com/product/bone-density-dexa-scan/>

# Depression and anxiety screening

- Depression prevalence: 21.2% (general population: 13.4%)
- Anxiety prevalence: 19.0% (general population: 9.6%)
- Screen at baseline and yearly
  - Depression: Patient Health Questionnaire (PHQ) – 2 or 9 item
  - Anxiety: Generalized Anxiety Disorder scale (GAD) – 2 or 7 item
- Refer to counseling/therapy



*Gillian Blease/Getty Images*

# PHQ-2 SCREENING INSTRUMENT FOR DEPRESSION

## PHQ-2 Screening Instrument for Depression

Over the past two weeks, how often have you been bothered by any of the following problems?

	Not at all	Several days	More than half the days	Nearly every day
Little interest or pleasure in doing things	0	1	2	3
Feeling down, depressed, or hopeless	0	1	2	3

**Scoring:** A score of 3 or more is considered a positive result. The PHQ-9 (Table 3) or a clinical interview should be completed for patients who screen positive.

PHQ = Patient Health Questionnaire.

<https://www.aafp.org/pubs/afp/issues/2018/1015/p508.html>

# Generalized Anxiety Disorder 2-item (GAD-2)

Share

The Generalized Anxiety Disorder 2-item (GAD-2) is a very brief and easy to perform initial screening tool for generalized anxiety disorder.<sup>1</sup>

Over the **last 2 weeks**, how often have you been bothered by the following problems?

Not at all

Several days

More than half the days

Nearly every day

1. Feeling nervous, anxious or on edge

0

+1

+2

+3

2. Not being able to stop or control worrying

0

+1

+2

+3

GAD-2 score obtained by adding score for each question (total points)

**A score of 3 points is the preferred cut-off for identifying possible cases and in which further diagnostic evaluation for generalized anxiety disorder is warranted.** Using a cut-off of 3 the GAD-2 has a sensitivity of 86% and specificity of 83% for diagnosis generalized anxiety disorder.



# Sleep

- Prevalence: 70% sleep disturbance
- Ask about sleep
- Encourage good sleep hygiene
- Refer to sleep medicine specialist



# Role of exercise

Recommendation: low to moderate physical activity

Benefits (Engels et al., 2018)

- Improved quality of life
- Reduced depression, anxiety, stress
- May reduce fatigue



<https://newsinhealth.nih.gov/2020/07/personalized-exercise>

# Summary

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- Vaccinations for all: flu, COVID, meningitis, HPV, Hep A, Hep B, Tdap
- Immunocompromised
  - Vaccinations: Pneumococcal, varicella, herpes zoster
  - Cervical cancer screening
  - Skin cancer screening
- DEXA scan when risk factors present
- Yearly depression and anxiety screening
- Evaluate sleep
- Promote physical activity

# References

- Engels M, Cross RK, Long MD. Exercise in patients with inflammatory bowel diseases: current perspectives. *Clin Exp Gastroenterol*. 2018;11:1-11 <https://doi.org/10.2147/CEG.S120816>
- Farraye, F. A., Melmed, G. Y., Lichtenstein, G. R., & Kane, S. V. (2017). ACG Clinical Guideline: Preventive Care in Inflammatory Bowel Disease. *The American journal of gastroenterology*, 112(2), 241–258. <https://doi.org/10.1038/ajg.2016.537>
- Syal, G., Serrano, M., Jain, A., Cohen, B. L., Rieder, F., Stone, C., Abraham, B., Hudesman, D., Malter, L., McCabe, R., Holubar, S., Afzali, A., Cheifetz, A. S., Gaidos, J., & Moss, A. C. (2021). Health Maintenance Consensus for Adults With Inflammatory Bowel Disease. *Inflammatory bowel diseases*, 27(10), 1552–1563. <https://doi.org/10.1093/ibd/izab155>

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# PANEL DISCUSSION



## Panel Discussion

Moderator: Ghassan Wahbeh, MD  
Kindra Clark-Snustad, DNP  
Kendra Kamp, ARNP  
Mitra Barahimi, MD  
Jason Harper, MD



# CLINICAL CASE 3



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