

Inflammatory bowel disease may up risk for psychiatric disorders

30 March 2021



100 patients (hazard ratio [HR], 1.3). The highest risk for overall psychiatric morbidity was seen during the first year after IBD diagnosis (HR, 1.4). Patients with extraintestinal manifestations also had a higher risk for psychiatric morbidity (HR, 1.6). All IBD types were associated with an [increased risk](#) for [suicide attempts](#) (HRs, 1.2 to 1.4), while completed suicide was particularly associated with CD (HR, 1.5) and elderly-onset IBD (diagnosed at age >60 years; HR, 1.7).

"Psychological follow-up should be provided to patients with IBD, especially those with extraintestinal manifestations and elderly-onset IBD," the authors write. "This follow-up should transpire within the first year after IBD diagnosis."

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract/Full Text](#) ([subscription or payment may be required](#))

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(HealthDay)—Adult-onset inflammatory bowel disease (IBD) is associated with an increased risk for psychiatric disorders and suicide attempts, according to a study published online Feb. 26 in the *Journal of Crohn's and Colitis*.

Jonas F. Ludvigsson, M.D., from the Karolinska Institutet in Solna, Sweden, and colleagues assessed the risk for psychiatric morbidity and suicide in adult-onset IBD patients using data from a population-based cohort study in Sweden (1973 to 2013). The analysis included 69,865 adult-onset IBD patients (ulcerative colitis: 43,557 patients; Crohn disease [CD]: 21,245 patients; IBD-unclassified: 5,063 patients) versus 3,472,913 general population controls and 66,292 siblings.

The researchers found that during a median follow-up of 11 years, there were 10.7 percent first [psychiatric disorders](#) in IBD patients (incidence rate, 8.4 per 1,000 person-years) versus 9.9 percent in the general population (incidence rate, 6.6), resulting in 1.8 extra psychiatric morbidity per

APA citation: Inflammatory bowel disease may up risk for psychiatric disorders (2021, March 30) retrieved 22 May 2021 from <https://medicalxpress.com/news/2021-03-inflammatory-bowel-disease-psychiatric-disorders.html>

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