CROHN'S DISEASE: HAS THE PHENOTYPE CHANGED?

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Introduction The long-held image of “the typical patient with Crohn’s disease” is of undernourishment – the opposite of the elevated BMI state associated with higher incidence of adverse cardiovascular risk factors in population studies. Cardiovascular risk is increased in patients with a number of chronic inflammatory disorders. The importance of this in Crohn’s disease is not generally addressed.

Aims/Background The BMI and cardiovascular risk profile of a cohort of patients with Crohn’s disease attending a specialist clinic in a tertiary referral hospital is evaluated.

Method The BMI was measured in 75 out-patients with Crohn’s disease over a 2 month period. Blood pressure, fasting lipoprotein profile and fasting glucose were also measured. Studied patients completed a questionnaire about their disease and its activity, their past medical history and smoking status.

Results 49% of the patients had a BMI >25–33% overweight, 16% obese. Of the patients with an increased BMI, 10% were taking corticosteroids at the time of measurement. 15% of patients were either hypertensive or on antihypertensive medications, 23% were current smokers and 27% had a total cholesterol of >5mmol/l.

Conclusion In this small study we have found that the prevalence of elevated BMI in patients with Crohn’s Disease is common in contrast to the past. Additional cardiovascular risk factors are also noted, even in this relatively young and small patient cohort. Going forward cardiovascular risk factors should be assessed and managed as part of a total care package in this patient group. Further studies are needed to evaluate the mechanism of this increase in BMI.