Faecal incontinence (FI) in IBD is common and under-reported. In a prior study, an existing questionnaire was found unsuitable for assessing FI in IBD due to inability to address fluctuating symptoms and IBD-related concerns. We aimed to develop a new psychometrically robust IBD-specific FI questionnaire.

**Methods** Participants were purposefully sampled from a UK IBD charity’s membership. The International Consultation on Incontinence Questionnaire development and validation protocol was followed in a two phase study. Phase 1: we progressively developed content, terminology and format of the new tool from feedback in the original study and four rounds of cognitive interviews. A modified Delphi survey of clinicians identified important clinical content. Phase 2: participants completed the final version of the ICIQ-IBD and a disease activity index twice, to evaluate validity of the questionnaire and consistency of assessment. A principal exploratory factor analysis identified underlying domains in the questionnaire.

**Results** 24 respondents (female n = 18, 75%; age: mean 50 yrs) participated in cognitive interviews. Ten clinicians clarified clinical content. 166/198 respondents (88%) returned the first (test) questionnaire. 143 (86% [76% of total sample]) returned the second (retest) questionnaire 2–6 weeks later. Most questions were relevant to most respondents. The new ICIQ-IBD discriminates between patients with and without FI, low and high disease activity, and concern levels. 110 respondents returning test and retest data had stable disease – weighted kappa was used to determine stability (test-retest reliability). 36/41 questions (87.8%) showed good or moderate agreement, suggesting the questionnaire is reasonably stable and reliable. Two domains were identified: bowel symptoms and quality of life, with a simple additive score for each domain.

**Conclusion** The new ICIQ-IBD is valid and reliable. Further psychometric testing to evaluate sensitivity to change will be conducted in a forthcoming intervention study.