Background Nowadays internet and social media community have provided a great amount of information for patients with inflammatory bowel disease (IBD). We aimed to assess the sources and needs of Chinese IBD patients through the internet and their impact on disease management.

Methods Between November 24, 2017 and March 1, 2018. Totally 414 questionnaires were recruited online from seven different large urban hospitals in China. Internet usage, IBD knowledge and medication adherence were examined. One-way ANOVA, student t-tests and multivariate regression were used for statistical analysis.

Results In all, 382 surveys were used for analysis, in which 291 (76.2%) had Crohn's disease (CD), 74 (19.4%) ulcerative colitis (UC) and 17 (4.5%) undetermined colitis. The most common IBD-specific information sources were gastroenterologists (81.7%), Internet (58.6%), and WeChat or other social media (48.7%). Patients most frequently visited Baidu (65.2%), WeChat (58.9%) and Haodaifu network platform (33.2%) for personal information searching of IBD. Among ten WeChat public accounts of IBD, the China Crohn's and Colitis Foundation (CCCF) (69.1%) and Changzaixin (20.2%) were most popular. A significant association was found between education ($PP=0.003$), frequent internet use in IBD-related information ($PPP=0.003$) and also had better medication adherence than undetermined patients ($p=0.009$). The majority of patients preferred obtaining information mainly through communication with (77.7%) or reference in the paper from IBD specialists (73%), only 18.6% patients preferred mainly from internet searching by themselves. They were interested in information about diet and daily life health care of IBD (81.2%), disease aetiology and course (80.1%), and medication advances and side effects (78.5%) from the Internet.

Conclusions Internet and social media like WeChat have become the major information source for IBD education in China. This is beneficial to gain disease-related knowledge and improve future self-management for patients. Future initiatives should focus on providing more high-quality IBD information and increase interaction in patient education and disease organisation.

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ULTRATHIN ESOPHAGO-GASTRO-DUODENOSCOPY: A USEFUL AND EFFECTIVE TOOL IN THE ENDOSCOPY SUITE

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Background Ultrathin endoscopy has been reported to be highly acceptable by patients even without sedation. The modality is underutilised with reported usage in <1% of the hospitals in countries around the world. Our aim is to review our experience with the use of ultrathin endoscopy at a tertiary care facility.

Methods Prospectively collected data on consecutive patients undergoing ultra-thin Endoscopy with Olympus GIF XQ160, outer diameter 5.9 mm, channel 2 mm between Jan 2009 and October 2017 were analysed. Trans-nasal route was used in patients with restricted mouth opening/cervical spine injury, oro-pharyngeal corrosive injury/malignancy, nasogastric or naso-enteral tube placement to avoid mouth to nose transfer (rail-road) or unsedated endoscopy in high-risk patients.

Results A total of 293 procedures were performed. Trans-nasal route was used in 235 (80.2%) patients; oral route was in 56 (19.1%) and trans-stomal route in 2 (0.7%) of patients. Esophageal strictures were the most common indication for either evaluation or placement of nasogastric tube in 106 (36.2%) patients. In 7 (2.4%) patients the modality was used for infants below 1 year (table 1). Trans-nasal route could be used when intended for all patients except two patients (one with bilateral epistaxis and another with markedly deviated nasal septum and large nose-ring).

Abstract IDDF2018-ABS-0182 Table 1 Indications for using Ultra thin endoscopy

Indication	Number
Restricted mouth opening/cervical spine injury or surgery	29
Oro-pharyngeal-laryngeal corrosive injury/malignancies	31
Esophageal benign and malignant strictures	106
Naso-enteral tube placement in neurological disorders	61
Gastro-duodenal benign and malignant strictures	17
Infants below 1 year	7
PEG placement	18
Esophageal SEMS placement/evaluation	4
Trans-gastrostomal endoscopy	2
Unsedated trans-nasal endoscopy in high-risk patients	18
Total	293

Conclusions Despite the potential advantages of ultrathin endoscopy in difficult situations, it is underutilised around the world. In our data, we have enumerated different difficult situations where availability of ultrathin endoscopy resulted in excellent outcomes, which were not possible with conventional endoscopes. We believe that ultrathin endoscopy is a useful modality in the endoscopy suite and can be a saviour in several difficult situations.

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BLOOD UREA NITROGEN (BUN) IS A PREDICTOR OF ASPIRATION PNEUMONIA AND IN-HOSPITAL MORTALITY AFTER PERCUTANEOUS ENDOSCOPIC GASTROSTOMY (PEG)

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Background Percutaneous Endoscopic Gastrostomy (PEG) is the preferred route for long-term enteral nutrition in dysphagic patients. However, in-hospital mortality after PEG is still a major concern with aspiration pneumonia reported as the major cause of death. Higher levels of blood urea nitrogen (BUN) have been associated with poor prognosis in patients with cardiovascular as well as cerebrovascular diseases. In this study, we investigated the prognostic utility of BUN in patients undergoing PEG.

Methods 190 patients (88 men and 102 women) who received PEG for enteral nutrition at our hospital between September 2013 and September 2016 were included in this study. ROC analysis was used to evaluate BUN and other commonly used