



SESSION (1)

Mental Health and IBD

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Patients with inflammatory bowel disease (IBD) have increased rates of depression and anxiety, with a lifetime prevalence approximately double that of the general population.^{1,2} Poor mental health in patients with IBD is associated with a significant impact on quality of life, worse disease course, increased rates of treatment failure with medications, and elevated risk of surgery.¹⁻⁴ In some patients mental health may decline as a result of their chronic illness, whereas in others pre-existing psychiatric illness may affect their ability to cope with a chronic gastrointestinal illness. In addition, it has been hypothesized that there may be shared pathophysiologic pathways between mental illness, particularly depression, and IBD. Although the associated mechanisms have not been fully elucidated, emerging evidence suggests that inflammatory pathways and the gut microbiome may contribute to both mood and anxiety disorders in patients with IBD.^{5,6} Given the significant impact of mental health on IBD it is important for gastroenterologists to be aware of simple screening tools for anxiety and depression validated in patients with IBD,³ the appropriate indications for referral to a psychiatrist or psychologist, and the mental health resources available in their community. Treatment of patients with psychiatric illness and IBD may involve both pharmacologic and nonpharmacologic options; higher-quality evidence is needed in this patient population.^{7,8}

References

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