

Ethnic differences in Inflammatory Bowel Disease discovered

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South Asian patients with Inflammatory Bowel Disease (IBD) are more likely to have a certain form of the disease and be diagnosed younger when compared with their white counterparts, according to research published in the Journal of Crohn's and Colitis today (Friday).

This study, funded by Bowel Research UK and the National Institute of Health Research Imperial Biomedical Research Centre, is the largest analysis to date on South Asian IBD patients based in the UK.

IBD is a group of diseases that cause inflammation in the digestive tract. Two common types are Ulcerative Colitis (UC) and Crohn's disease (CD). UC affects the large intestine, while CD can affect any part of the digestive tract, from the mouth to the anus. Common symptoms of IBD include diarrhoea, a sudden urge to use the bathroom, and abdominal pain. Many people with IBD require medication or surgery to help control their symptoms.

The researchers analysed data from more than 30,000 patients. They found that in South Asian IBD patients, ulcerative colitis was more common than in their white counterparts (57% vs 45% of the IBD cohorts studied). South Asian patients were diagnosed on average two years younger than their white counterparts. IBD was also more common in South Asian men than women, whereas in the white population the genders were more equally affected.

Around 300,000 people suffer from IBD in the UK and most cases are diagnosed before the age of 35.

Dr Sharmili Balarajah, a Bowel Research UK researcher, gastroenterology trainee at Imperial College Healthcare NHS Trust and doctoral student at Imperial College London, said: "Our current understanding of IBD is primarily derived from studies focused on white populations. Our research is groundbreaking, as it reveals distinct variations in IBD among different ethnic groups, especially South Asians. By understanding these differences, we can develop more personalised treatment approaches for IBD patients, ensuring that their specific needs are addressed."

The researchers also found the disease behaved differently in the different ethnicities. South Asians were more likely to have the large bowel affected, and less likely to have narrowing of the bowel (stricturing) in CD, and were more likely to have extensive large bowel inflammation in UC than in white patients.

The research also assessed whether the two ethnic groups received the same level of care and found that there was consistency in the treatment received regardless of ethnicity.

Lindsay Easton, CEO of Bowel Research UK, said: "IBD can be a debilitating disease that has a huge impact on people who are often diagnosed when they're just in their 20s and 30s. We know very little about the causes of IBD and there's no cure. Research like this, and other projects we're funding, shed light on how we can tailor care for different groups and how the disease develops."

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