Medication Use and Comorbidities Among Elderly as Compared to Younger Patients with Inflammatory Bowel Disease in the TARGET-IBD Cohort

Edward L. Barnes1, John S. Hanson2, Miguel Regueiro3, Sumona Saha4, Bruce E. Sands5, David T. Rubin6, Marla C. Dubinsky7, Corey A. Siegel7, Derek R. Gazis8, Julia M. Crawford9, Millie D. Long1

INTRODUCTION

Little is known regarding the use of inflammatory bowel disease (IBD)-related medications among elderly patients (>65 years).

SPECIFIC AIMS

This study describes the distribution of patient characteristics and patterns of medication use among patients with IBD across the age span.

METHODS

Cohort

• TARGET-IBD is an ongoing longitudinal, observational cohort beginning in July 2017 of >3,400 patients with IBD, managed according to local practice standards at 34 academic and community sites in the United States

• Redacted medical records (structured and unstructured) from consenting patients were ascertained including:
  – Patient narratives, endoscopic findings, laboratory, pathology, and imaging data every six months
  – Patient reported outcome (PRO) measures were collected at enrollment and every 3 months
  – Blood samples were collected at enrollment and annually

Patient Population

2,259 Patients enrolled between July 2017 and September 2019 were included in this analysis.

Medication Use

Any documented use of medication by drug class was captured at the time of enrollment.

Statistical Analysis

• The prevalence of medication use by drug class at the time of enrollment among patients with both ulcerative colitis (UC) and Crohn’s disease (CD) was estimated

• Proportions and means of patient characteristics were compared using t test and chi-squared statistics

• The odds of biologic use and 95% CIs was estimated at enrollment using logistic regression

RESULTS

Demographics

- 38% UC, 62% CD
- 65% male
- 85% White
- 16% Hispanic

Conclusions

• Mesalazine was the most common medication used among patients with CD >65 years and among participants with UC across all age categories

• Patients with CD >65 years were more than twice as likely to be users of mesalamine at enrollment than patients <30 years (p<0.0001)

• Anti-tumor necrosis factor alpha (anti-TNF) use decreased in patients >65 years vs patients <30 years for both disease types

• There was an association between CD status and biologic use; there was no association between age, gender, race or cardiovascular disease and the odds of biologic use in patients >65 years

Acknowledgements: TARGET-IBD is a study sponsored by TARGET PharmaSolutions [TPS]. TPS is a real-world clinical data company based in Durham, NC. The authors would like to thank all the investigators, participants and research staff associated with TARGET-IBD. ClinicalTrials.gov identifier: NCT01251118

American College of Gastroenterology • October 25-30, 2019 • San Antonio, TX