

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



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## 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 consented 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
  - 46% male
  - 85% White
  - 3.8% Hispanic ethnicity
  - 77% private insurance, 16% Medicare, 7% Medicaid
  - 58% were receiving treatment at academic sites and 42% at community sites
  - Based on medical history, 6% have history of cardiovascular disease, 5% have history of type II diabetes mellitus, 20% have history of hypertension
- Patient characteristics including age at diagnosis, insurance status, race, ethnicity, and history of co-morbid disease was ascertained from the medical record at the time of enrollment.

Figure 1. Distribution of Medication Use at Enrollment Among Patients with IBD

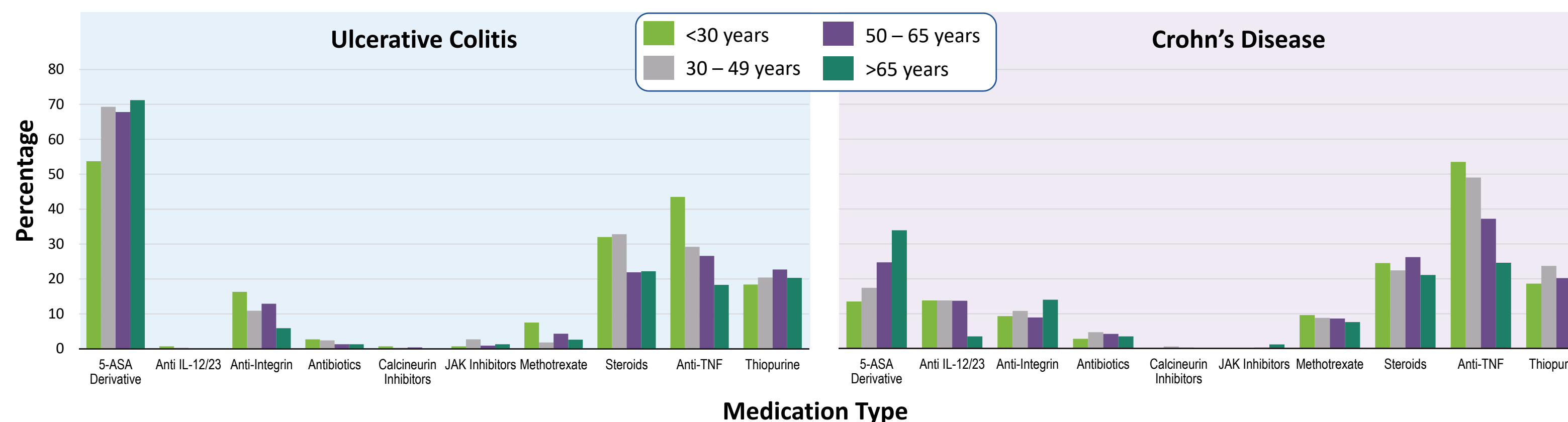


Figure 2. Distribution of 5-ASA Derivative at Enrollment Among Patients with IBD

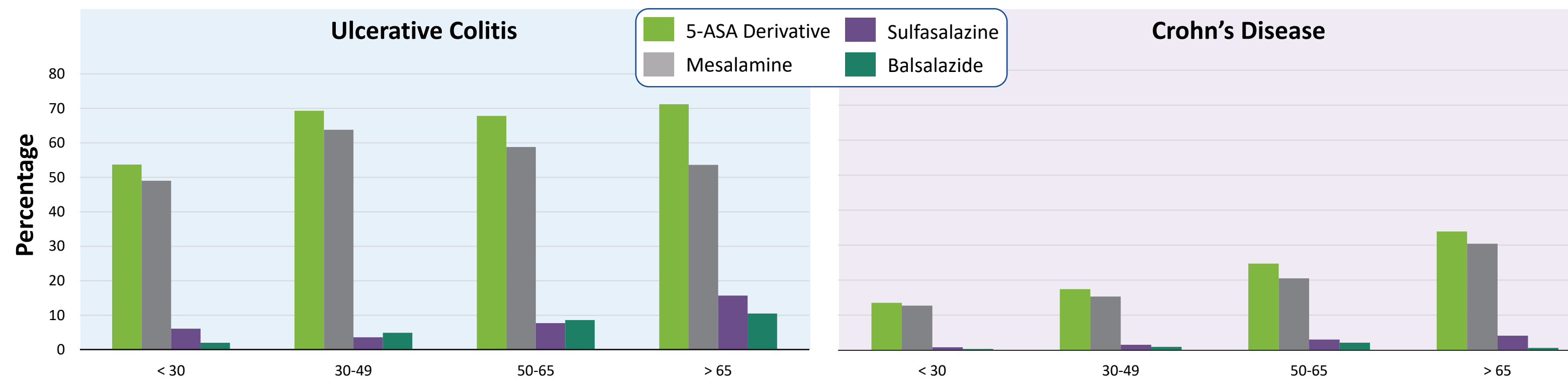


Figure 3. Distribution of Anti-TNF agent at Enrollment Among Patients with IBD

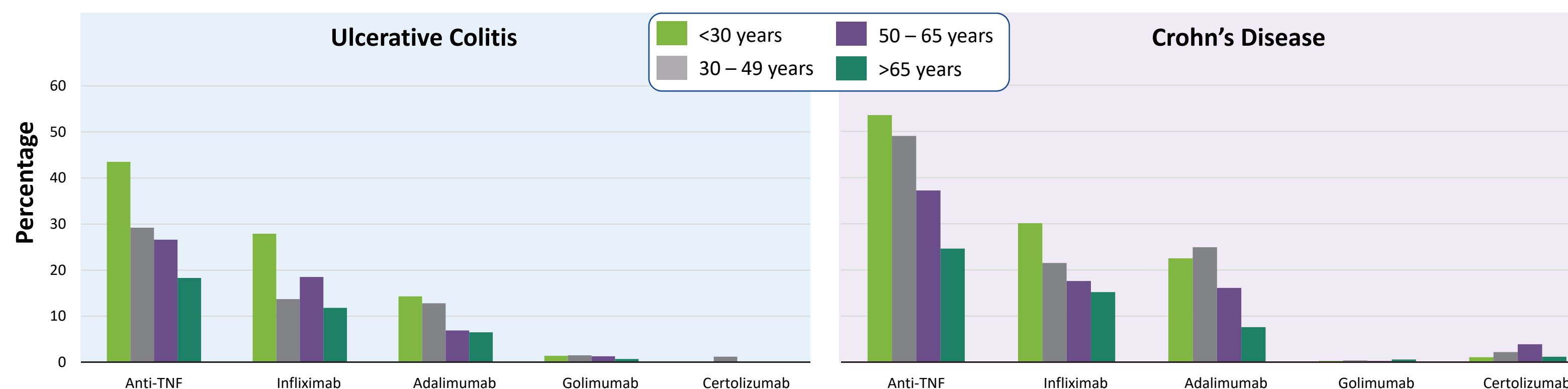


Figure 4. Distribution of Medication Use at Enrollment by Age at Diagnosis

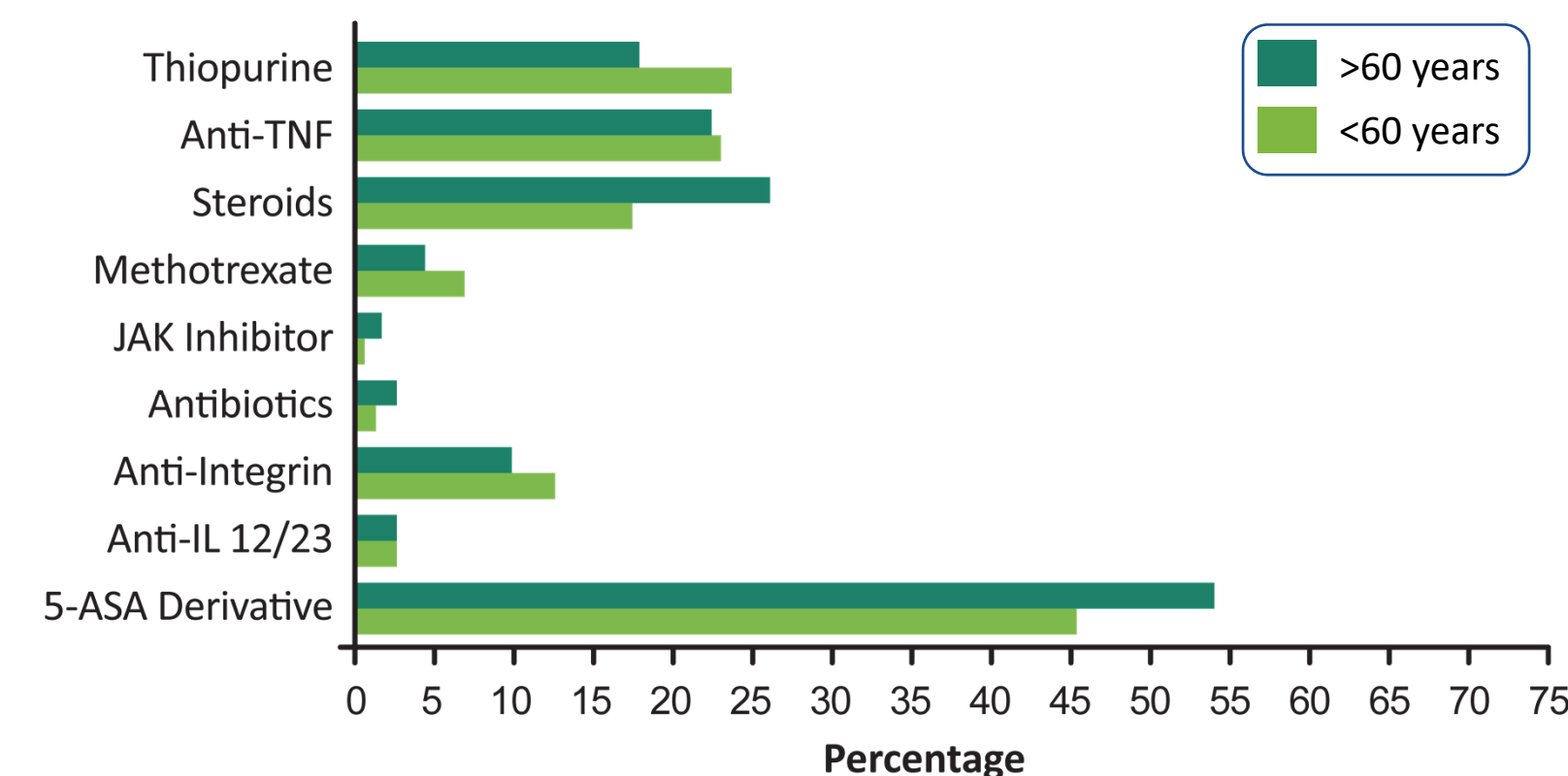
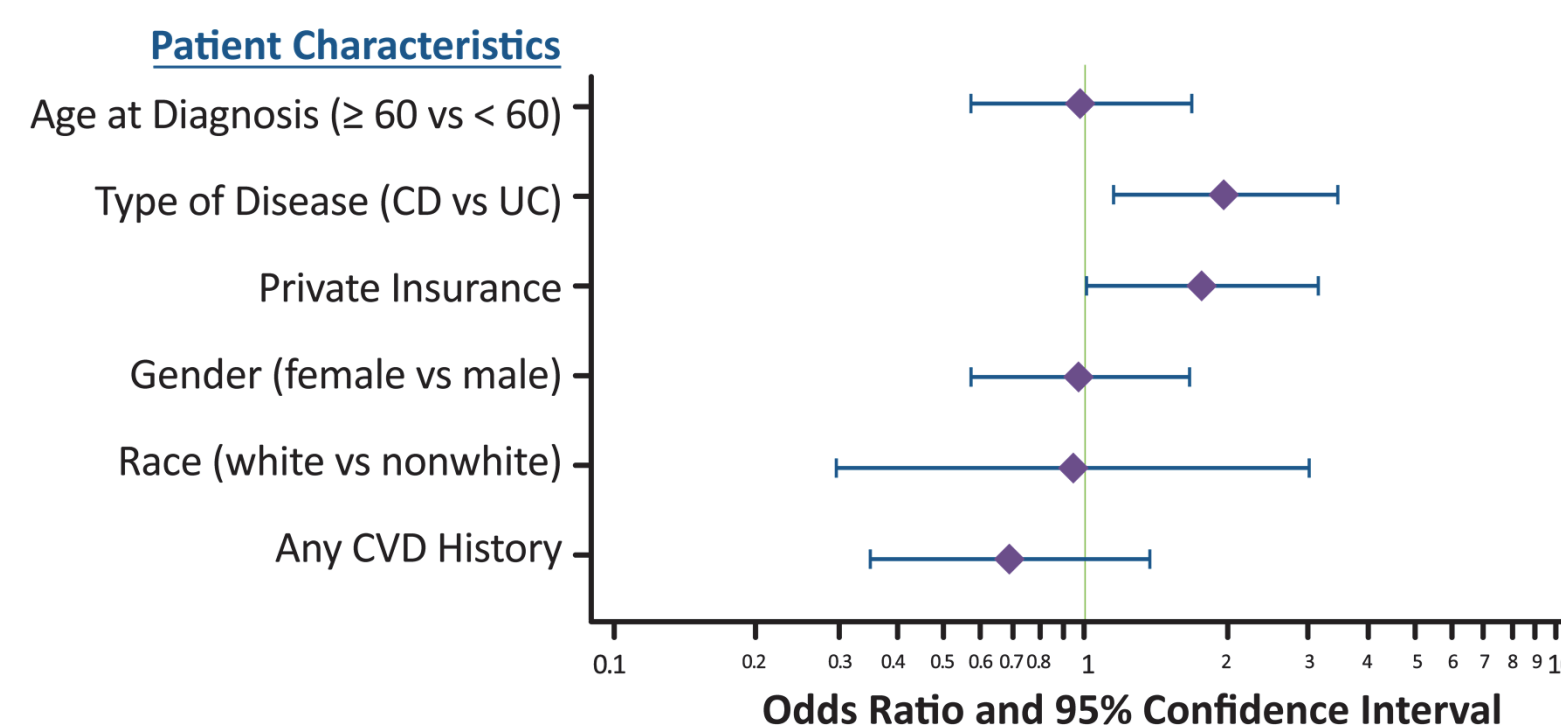


Figure 5. Odds of Any Biologic Use at Enrollment by Patient Characteristics Among Patients >65 Years



## CONCLUSIONS

- Mesalamine 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

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