



SESSION 3

BONE HEALTH AND IBD

Bone Health in the IBD Patient

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Patients with inflammatory bowel diseases (IBD; Crohn's disease, ulcerative colitis) are at risk for impaired bone health both due to underlying disease as well as treatments associated with IBD. Population-based studies have demonstrated a two-fold increased risk in patients with IBD. Thus, women > 65 years, men >70 years, adults age >50 years with current or past fracture(s), or those with prednisone use >7.5mg/day for 3 months or longer should be screened for low bone density with a DEXA scan for osteoporosis and bone fracture. Treatment of osteoporosis includes non-pharmacologic (calcium and vitamin D, fall risk assessment, and exercise) as well as pharmacologic therapy. Among the medical treatment options, clinical trials have demonstrated both efficacy and safety of bisphosphonates in improving bone health in patients with IBD. Apart from its effect on bone health, studies have also suggested an association between low serum vitamin D levels and risk of disease exacerbation in patients with IBD. Use of vitamin D to prevent or treat inflammation in IBD has yielded mixed results.

Key References

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