

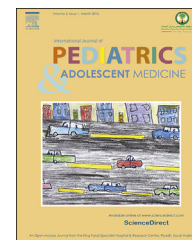
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Original Research Article

Clinical presentation of inflammatory bowel disease in Saudi children (Single centre experience)

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KEYWORDS

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Ulcerative colitis;
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Saudi Arabian children

Abstract *Background:* Inflammatory bowel disease (IBD) includes Crohn's disease (CD), ulcerative colitis (UC), and indeterminate colitis (IC). IBD is a disorder characterized by chronic inflammation of the gastrointestinal tract with frequent relapse and remission courses. There is limited information regarding this disease in Saudi children, despite a rising worldwide incidence of IBD.

Objective: To study clinical and demographic characteristics of Saudi children diagnosed with IBD at time of presentation. Diagnosis, disease localization, and growth of pediatric IBD patients were compared with international data.

Study design: In this retrospective study, charts of all children under the age of 14 years who were diagnosed with IBD and received follow-up at King Faisal Specialist Hospital and Research Center (KFSH&RC) from January 2001 to December 2011 were reviewed.

Results: Sixty-six children were diagnosed with IBD; 36 (54.5%) had Crohn's disease (CD), 27 (41%) had ulcerative colitis (UC), and 3 (4.5%) had indeterminate colitis (IC). A male predominance was demonstrated in both CD (61%) and UC (56.6%). The mean age at diagnosis was 9.3, 7.3 and 7.5 years in CD, UC and IC, respectively. A positive family history was found in 19.7% of all patients. The most common presenting symptoms were diarrhea (89.4%), rectal bleeding (75.8%) and abdominal pain (62%). The most common site affected in CD was the ileocolonic region (41.6%) while pancolitis was predominant in UC (74.1%).

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Conclusions: CD is the most prevalent form of IBD in Saudi children. Male predominance and a high rate of growth failure were documented in children with CD. Clinical presentation, family history and disease localization are comparable to international data.

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1. Introduction

Inflammatory bowel disease (IBD) includes Crohn's disease (CD), ulcerative colitis (UC), and indeterminate colitis. These inflammatory conditions are induced by complex interactions between environmental, genetic, microbial and immunoregulatory factors. Their exact etiology remains obscure.

Inflammatory bowel disease (IBD) is a disorder characterized by chronic inflammation of the gastrointestinal tract with frequent relapse and remission courses. The diagnosis and differentiation of Crohn's disease or ulcerative colitis is based on clinical, radiographic, endoscopic, and histological findings [14–16].

Observations of children with IBD often suggest a more severe course than those found in adults [8,9]. As the incidence of inflammatory bowel disease (IBD) is rising worldwide [10–13], the data concerning this disease in Saudi children is beginning to increase [1–7].

2. Method

In this retrospective study the charts of all children under the age of 14 years who were diagnosed with IBD and received follow-up in our hospital (King Faisal Specialist Hospital and Research Center, Riyadh, Saudi Arabia) from January 2001 to December 2011 were reviewed. This study included 66 pediatric patients under 14 years of age at time

of diagnosis who were diagnosed with inflammatory bowel disease as confirmed by clinical, endoscopic, radiologic and histopathological evaluation. Variables analyzed included patient demographics (age, gender, nationality and region), clinical presentation, length of symptoms before diagnosis, growth, family history, and diagnostic findings include laboratory, radiological endoscopic and histopathological findings. The data were analyzed and presented in a simple percentage format.

3. Ethical consideration

This study is entitled Pediatric Inflammatory Bowel Disease in Saudi Arabia with RAC # 2101090. The study was reviewed by a research ethics committee (Research Advisory Council, Office of Research Affairs) at KFSSH&RC Riyadh on 20 October 2012 and the proposal was recommended for approval.

4. Results

Sixty-six patient were diagnosed with IBD from January 2001 to December 2011; 36 (54.5%) had CD, 27 (41%) had UC and 3 (4.5%) had IC. Most of the patients included in the study were Saudi (94%) (see Table 1).

Of 66 IBD patients, 38 (57.6%) were male and 28 (42.4%) were female. The male-to-female ratio was 1.35. A male predominance was demonstrated in both CD (61%) and UC (56.6%).

Table 1 Demographic characteristics of inflammatory bowel diseases in Saudi children.

	CD	UC	IC	Total (%)
Nationality				
S	33 (92%)	26 (96.3%)	3 (100%)	62 (94%)
NS	3 (8%)	1 (3.7%)	0	4 (6%)
Gender				
M	22 (61%)	15 (55.6%)	1 (33.3%)	38 (57.6%)
F	14 (39%)	12 (44.6%)	2 (66.7%)	28 (42.4%)
Age range (years)				
<2	4 (11.1%)	1 (3.7%)		5 (7.6%)
2–<6	1 (2.8%)	8 (29.6%)		9 (13.6%)
>6	31 (86.1%)	18 (66.7%)	3 (100%)	52 (78.8%)
Age range (years)	(0.25–14)	(1.75–14)	(6–9.5)	(0.25–14)
Mean (years)	9.3	7.6	7.5	8.1
Interval between diagnosis and presentation	(1–36)	(6–12)		
Range (months)		(1–60)		
Mean (Months)	8.7	8.4		
Family history of IBD	5 (14%)	6 (22.2%)	2 (66.7%)	13 (19.7%)
Total	36 (54.5%)	27 (41%)	3 (4.5%)	66 (100%)

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