

AB170. SOH21AS176. The effect of faecal diversion on the nutritional status of patients with complex Crohn's disease with mass

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Background: Operative management of Crohn's disease (CD) is necessary for patients failing medical treatment. The two-stage approach with defunctioning stoma after resection and anastomosis is well-described. We are presenting our experience with a modified two-stage approach for complex CD with mass where first a defunctioning ileostomy is created paired with intensive medical treatment. The second stage entails the resection of the Crohn's mass with primary re-anastomosis and stoma-reversal.

Methods: Post-operative nutritional status was assessed by measuring the patient's weight and serum albumin levels. C-reactive protein (CRP) was used as surrogate for assessment of disease activity

Results: From 01/01/2016 to 30/11/2020, 42 ileostomies were formed (22 male, 20 female, median age 34.64 and median length of stay 8 days). The median time to reversal was 188 days. Median baseline Serum Albumin increased to 46 from 38 (P value 0.0003). Median body weight has increased from 55.3 kg to 68 kg (P value 0.014). Median

CRP in the same period has decreased from 23.5 to 2 (P value 0.027). Eighteen patients of the cohort had resections with no anastomotic leaks.

Conclusions: Our practice suggests that defunctioning ileostomy first showed better outcomes for patients with complicated CD by improving the nutritional status.

Keywords: Crohn's resection; nutritional status

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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