

### Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/gi-insights/living-well-with-ibd-proactive-health-maintenance-strategies/18013/>

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Living Well with IBD: Proactive Health Maintenance Strategies

### Announcer Intro:

You're listening to *GI Insights* on ReachMD. On this episode, we'll learn about the importance of health maintenance in patients with IBD with Dr. Andres Yarur, who's Associate Professor of Medicine at Cedars Sinai Medical Center in Los Angeles, California. Here's Dr. Yarur now.

### Dr. Yarur:

Another very important topic that we commonly oversee is health maintenance in patients with inflammatory bowel disease. Health maintenance emphasizes health promotion and disease prevention rather than having to manage a complication or symptoms. And patients with inflammatory bowel disease, for several reasons, have a higher risk of developing, specific conditions that are preventable, so this is important, and we need to be aware of it.

And it's really a challenge for a lot of reasons. So one is that recommendations evolve very quickly, and the perfect example is vaccinations.

Vaccinations are very important and that includes influenza vaccination every year. The data is actually pretty strong, and all IBD patients should be receiving the influenza vaccine every year and every season. For pneumonia, something similar. Pneumonia can be a really complicated infection and may require admission, so it's important to prevent it. The pneumonia vaccine, which is a serial immunization, is indicated for every patient 65 years or older or those patients that are receiving immunosuppressants that are between 19 and 65.

There are other vaccines that are very important, such as the herpes zoster vaccines, the Shingles vaccine. Shingles can be a very painful complication, and specifically, patients on a JAK inhibitor, for example, are at increased risk of developing zoster. Even in someone that already had zoster, vaccination can prevent a new episode. Now, there are several of these medications that we use that can increase the risk—as I mentioned, JAK inhibitors, but also steroids, which unfortunately, we still commonly use, and patients on anti-TNF and immunosuppressants in combination.

The COVID vaccine is also important. The recommendations evolved. I do recommend looking at the CDC website as we get more data and new vaccines, and it's a weekly evolving topic.

Another big component of health maintenance is neoplasia screening. Among the neoplasia screenings that we need to be aware of is colorectal cancer. There is a specific patient population with IBD that are at higher risk of developing dysplasia in the colon and potentially colon cancer, and that includes patients with extensive, long-term inflammation in the colon and patients with what we call primary sclerosing cholangitis, which is a liver disease that can commonly be seen in association with inflammatory bowel diseases. The other surveillance that is important is cervical cancer for women.

Skin cancer is very important. Patients are at higher risk of developing melanomas, which can be a very devastating disease. And also non-melanotic skin cancer, which even though has a better prognosis versus melanoma, can be quite complicated. And osteoporosis is another thing that we need to be screening for in patients, especially with long-term use of corticosteroids more than three months, smokers, postmenopausal women, hypogonadism, and those with a low BMI.

Depression and anxiety is also quite prevalent in the IBD population. We should be screening patients for depression every time that they go in the clinic, and especially the first visit. There are several tools available for that.

And ultimately, I recommend reading several guidelines in healthcare maintenance that are available from the Crohn's & Colitis Foundation and from the American College of Gastroenterology. Sometimes we forget because we're focused on treating the IBD and we forget about health maintenance, but it is important. Be aware of it. Not only you should be aware of it, but also your staff. Nurses can help a lot with these things—emphasizing vaccines, for example, making sure patients are getting their health maintenance on time—so work as a team and approach this as a team in your clinic.

**Announcer Close:**

That was Dr. Andres Yarur talking about health maintenance for patients with IBD. To access this and other episodes in our series, visit *GI Insights* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!