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THE TOLL-LIKE RECEPTOR (TLR)-4 RELATED A299G AND T399I POLYMORPHISMS IN TURKISH INFLAMMATORY BOWEL DISEASE POPULATION

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Background: In the pathogenesis of Inflammatory bowel disease (IBD) background of genetic susceptibility is still under investigation. Innate immune system may have a key role. Toll like receptors 4 (TLR4) and the related polymorphisms of A299G and T399I are in the candidate list accused for the pathogenesis of IBD.

Aim: We want to investigate the relationship between the polymorphisms A299G, T399I with IBD patients' clinical data.

Methods: We collected clinical data and also blood samples for genetic analysis from the IBD pateints who are following in the IBD clinics of our hospital. The clinical data documented for the study was as follows; the type of the disease (Crohn's disease (CD) or Ulcerative Colitis(UC)), age, sex, date of the diagnosis, disease localization and phenotype, corticosteroid usage, smoking, family history, Enteamoba histolytica infestation history. For control group we include healty unrelated blood donors. The polymorphisims studied with PCR method.

Results: A total of 238 IBD patients (mean age: 41,7 \pm 15,5, Male/female: 127/111), 108 CD and 120 UC), and 191 controls (age 35,2 \pm 11,2, Male/female: 100/91) included to the study. For all IBD patients the percent of presence of A299G and T399I heterozygot genotype frequencies were 5.5% (13/238), 6,7% respectively. These frequencies were not different statistically in the control group which were 5.9%, 7,5% respectively. Beside genotype frequencies, we also the calculated the allele frequencies which were not different in patient and control groups. In subgroup analysis we found that for patients with Crohn's disease, A299G heterozygote genotype more was frequent in the patients with lieal disease (p: 0,021) and also inflammatory genotype (p:0.008).

Discussion: Our results related to the genotype and allele frequencies of TLR 4 polymorphisms in IBD is the first result for our country. For Crohn Disease, A299G heterozygot genotype is found to be higher in ileal disease and also in inflammatory phenotype.

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IMPORTANCE OF HEALTH-RELATED QUALITY OF LIFE IN PATIENTS WITH ULCERATIVE COLITIS AND CROHN'S DISEASE

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Background: Health-related quality of life (HRQOL) is substantially deteriorated in Inflammatory Bowel Disease (IBD)-patients because of its chronic course. There are still contradictory results concerning the influence of treatment on the different domains of HROOL.

Aims: The pilot study aimed to validate the importance of HRQOL by: 1. comparing HRQOL in IBD patients in exacerbation and remission with healthy controls; 2. assessing the influence of treatment on HRQOL and 3. correlating the clinical and HRQOL-scores in ulcerative colitis (UC) and Crohn's disease (CD).

Materials and methods: Forty-eight individuals were included, 15 healthy controls and 33 patients with IBD. IBD patients were divided into 21 in exacerbation and 12 in remission using CDAI for CD-patients and Mayo-score for UC-patients; 16/33 patients were hospitalized for the second time and followed up.

HRQOL was measured using Inflammatory Bowel Disease Questionnaire, developed by G. Guyatt and E.J. Irvine, McMaster University - Canada. The results were statistically processed using variation and correlation analyses as well as paired samples test at significance level of p < 0.05.

Results: 1. Patients in exacerbation have significantly decreased HRQOL in all domains compared to the control group (p<0.001) while HRQOL of patients in remission is close to the controls (p<0.001).

- 2.HRQOL was improved in 7/16 patients who maintained remission, in all domains (p=0.05).
- 3. There is a strong correlation between clinical scores and HRQOL $p\!<\!0.01$ for CDAI and $p\!<\!0.001$ for Mayo score.

Conclusions: 1. IBD seriously deteriorates HRQOL.

- 2. Patients in remission can achieve HRQOL close to the one of healthy subjects.
- 3. The emotional health needs longer period to improve than other domains. 4.IBDQ correlates with disease activity.

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LYMPHOPROLIPHERATIVE DISORDERS DIAGNOSED IN AN INFLAMMATORY BOWEL DISEASE PATIENT SERIES

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Introduction and Aim: The relationship between inflammatory bowel disease (IBD) and lymphoproliferative disorders (LD) has been previously reported. Our aim has been to describe the local incidence of LD in an IBD Clinic, and describe the clinical characteristics of observed cases.

Methods: Our IBD Clinic data are collected prospectively in a database. All the information was obtained from it, and contrasted with the clinical files. In all cases, IBD had been diagnosed according to Lennard-Jones' criteria, and confirmed by follow-up. Thiopurines were used at a dose of 2-3mg/Kg/d azathioprine or 1-1,5mg/Kg/d 6MP. In patients treated with infliximab, 5mg/Kg in weeks 0, 2, 6 was used as an induction, followed by maintenance as clinically needed.

Results: We identified 5 cases of lymphoma in 786 patients (0.63%), four of them were males. Three had been diagnosed with ulcerative colitis and two with Crohn's disease.

The mean time from IBD to lymphoma diagnosis was 4.9 years (r: 0-20). Mean age at lymphoma diagnosis was 53.6 years (r: 41-76). Three were intestinal lymphomas, one affected head and neck and the other one the mediastinum. The latter corresponded to a Hodgkin's disease, whereas the remaining four were B-cell non-Hodgkin lymphomas. Two cases were associated to Epstein-Barr virus infection. Three had been treated with thiopurines, and two of them also with infliximab.

After the diagnosis, one patient received chemotherapy, radiotherapy and bone marrow transplant (BMT), another chemotherapy and a third chemotherapy and BMT. The remainig two cases (primary colonic lymphomas) were treated surgically. After a mean follow-up of 25.6 months (r 4-44) after the latest treatment, all patients are in remission.

Discussion: In our series, lymphomas affetcted more males than females and, in contrast with other authors, predominantly ulcerative colitis. Not all patients had been submitted to immunosuppressors or biologicals. LD have to be remembered when caring for patients with IBD, because it is a potentially curable complication, after early diagnosis and therapy.

P241 FERTILITY IN PATIENTS WITH INFLAMMATORY BOWEL DISEASE

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Background: IBD affects mainly young adults. Inflammatory activity of the disease, intraabdominal complications, surgery, and drug therapy may influence fertility. Although it has been considered that fertility in IBD patients is similar to that of the general population, IBD patients had a lower number of children.

Aims: To assess the impact of IBD on pregnancy wishes and fertility.

Patients and Methods: An structured questionnaire with items specifically directed to the study objectives was sent by conventional mailing to 850 IBD patients of age, followed in our center. The questionnaire included a sealed envelop to be returned.

Results: 503 (60%) patients answered the questionnaire. Median age was 40 years-old (19-85), 48% were women, and 51% had Crohn's disease. 357 (71%) patients had a total of 659 children, in a similar proportion among gender and type of IBD. 36% of children were born after IBD was diagnosed. At the time of conception, patients were on 5ASA (38%) or thiopurines (15%). A total of 132 miscarriages were registered, 46% after IBD diagnosis (in these cases, 41% were not taking drugs, 27% 5ASA, 10% methotrexate, and 5% thiopurines). 6% of patients were evaluated for infertility, and all of them attempted assisted reproduction that failed in 33% of cases. 78% of patients who did not have children stated that it has been of their own volition.

 ${\bf Conclusions:}\ {\bf Most\ IBD\ patients\ have\ children,\ but\ only\ one\ third\ after\ the\ disease\ diagnosis,\ independently\ of\ their\ gender\ and\ type\ of\ IBD.$

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EPIDEMIOLOGY OF THE INFLAMMATORY BOWEL DISEASE IN URUGUAY

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Objective: To know the different epidemiological aspects of the Inflammatory Bowel Disease (IBD) in Uruguay.

Material and method: From June 2006, there was established an IBD's National Register. The captation was established by voluntary denunciation of