cohort showed substantially more ileocolonic (71%) and upper GI (28%) involvement. Immunomodulator use was higher: 57% in CD and 40% of UC paediatric patients; 20% from the latter required a colectomy.

Conclusions: The preliminary results from this first Australian population natural history study show high rates of inflammatory disease and immunosuppression suggesting earlier diagnosis and aggressive treatment. Future data will identify prognostic factors of severe disease, as well as health care costs.

Reference(s)

P641 Anxiety and depression in a prospective cohort of inflammatory bowel disease patients in Ireland
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Background: Depression is one of the more recognised illnesses that has been associated with chronic diseases and projected to be the second worldwide condition by 2020. Both anxiety and depression links to Inflammatory bowel disease (IBD) have been the focus of many studied over the past decade. In our study, we evaluated the level of hospital anxiety and depression scale (HADS) in a homogenous population cohort of Irish IBD patients, in their second decade of IBD diagnosis.

Methods: IBD patients who were prospectively diagnosed 1991–1992 in the greater Dublin area were included in twenty year follow up study. For this part of the study they were asked to complete the HADS questionnaire, disease activity index, medical and surgical IBD history, and to express their interest in IBD information.

Results: There were 100 questionnaires analysed after excluding 5 (2 IC and 3 UC to CD). Of those 64 patients had CD and 36 had UC. Over all there was no gender difference in anxiety or depression in IBD in general, however when evaluating CD separately from UC depression appeared significantly more than anxiety in each subgroup p < 0.001. UC patients at younger age had significantly higher anxiety and depression of 0.012 and 0.013 respectively and were more interested in IBD information than older UC patients. IBD disease activity had greater effect on anxiety than depression, that was more marked in UC than CD, whereas IBD disease course and hospitalisation didn’t seem to have an effect on anxiety or depression.

Conclusions: IBD was proved to be associated with anxiety and depression in Ireland. Patients still remain anxious despite many years of diagnosis and likely to be interested in seeking information at younger age particularly if they had UC. Patient education and counselling would help addressing anxiety and depression by their physician and perhaps psychologist for better outcomes.

P642 Anorectal cancer associated with Crohn’s disease
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Background: Like ulcerative colitis, patients with Crohn’s disease have increased risk of developing colorectal cancer in comparison with the background population. In Western countries, colorectal cancer associated with Crohn’s disease is predominant in right-side colon, whereas in Japan, approximately 70% of the cancer was located in rectum and anus. This study aimed to clarify the clinicopathological difference between anorectal cancer and the other colorectal cancer in Crohn’s disease.

Methods: A literature search was performed using Ichushi (Japanese medical literature database) between 1983 and December, 2011 for colorectal cancer associated with Crohn’s disease. One hundred and seventy-four cases were picked up, and seven cases were excluded, because the location of the tumor was not documented precisely. Therefore, 167 cases were used for analysis. The cases were classified to two groups: the cancer was located in rectum or anus [RA group (n = 115)] and elsewhere [control: C group (n = 52)].

Results: The location of the tumor was rectum (57%) and anus (43%) in RA group, whereas it was right colon (54%) and left colon (46%) in C group. The age at cancer diagnosis was younger in RA group [41 (25–89); median (range)] than in C group [47 (25–84); p < 0.027]. The duration of Crohn’s disease was longer in RA group (0–39 (16) years) than C group (2 (0–37) years; p < 0.0001). The proportion of penetrating behavior was higher in RA group than in C group (55.8% vs. 31.0%; p = 0.16). Examination under anesthesia revealed cancer in 16% in RA group preoperatively. The diagnosis had not been achieved as cancer in 19% (RA group) and 38% (C group) before operation with statistical significance (p = 0.013). The proportion of well differentiated carcinoma was lower in RA group than in C group (22% vs. 48%; p = 0.003), and mucinous histology was more predominant in RA group (62% vs. 21%; p < 0.0001). The proportion of the patients according to the clinical stage (0:1.2:3:4) was 1%/9%/34%/30% in RA group and 16%/38%/32%/11% in C group, and the difference was statistically significant (p = 0.046).

Conclusions: Anorectal cancer associated with Crohn’s disease was more advanced in stage. Early detection of such tumors is needed.

P643 Anemia in patients with inflammatory bowel disease – A nationwide cross-sectional study

Background: Anemia is the most common complication in patients with inflammatory bowel disease (IBD). The therapeutic strategy for the treatment of anemia in patients