

Disease Severity in Inflammatory Bowel Disease: Do Patients and Physicians Agree?

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Background and Aim

Evaluation of disease severity in inflammatory bowel disease (IBD) requires comprehensive consideration of disease course and health status of individual patients. In order to ensure good care adequate description of the severity of the disease is necessary. It is not clear how well physician assessment covers the disease impact perceived by patients. In the context of a larger project, which compares patients own perception with assessment by physicians (IBD-Severity-Study), we wanted to see how well patients and physicians agree on global assessment of disease severity. We used the Disease Severity Index (DSI) as a standard measure for additional comparison (DSI, Siegel 2018).

Aim:

To compare patient and physician global assessment of disease severity of case scenarios in relation to standardized assessment using a clinical disease severity index.

Results

- ratings from 319 patients (168 CD, 151 UC) and ratings from 34 physicians
- UC cases:**
 - Number of patient ratings ranging from 122 to 125 and physician ratings ranging from 17 to 26 per case
 - Patient and physician ratings similar and corresponded to the disease severity of the case scenarios (from mild to severe)
 - Mean physician ratings on average 10 points below mean patient ratings : 9.4 (95% CI -0.7 to 19.4) for mild disease, 8.5 (95% CI 0.5 to 16.5) for moderate disease and 10.1 (95% CI 1.3 to 18.9)
- CD cases:**
 - Number of patient ratings ranging from 77 to 125 and physician ratings ranging from 13 to 21 per case
 - Mean physician and mean patient ratings were very close, both differ substantially from the DSI for the respective case

Methods

Study design

- Online surveys of patients and physicians

Participants (rater groups)

- Patients with ulcerative colitis (UC) and Crohn's disease (CD)
 - Recruitment by national patient organisation (DCCV) and participating physicians
- Physicians (IBD experts)
 - Recruitment via the DCCV advisory board and other professional contacts

Instrument and data collection

- Both groups rated disease severity for a random selection of standard case scenarios on a simple visual analogue scale (VAS)
- 8 standard case scenarios (5 CD and 3 UC) with a set DSI not known to the raters (mild, moderate and severe cases)
- Identical case scenarios were presented to both groups
- Participants were asked to complete a global rating
 - Excerpt from the introduction to the survey:

"After two questions about your background, we show you case histories of people with Crohn's disease or ulcerative colitis. For each case, you will be asked to rate the severity of the case using a slider"

Analysis

- Visualisation of the distribution of DSI scores (patients and physicians) by boxplots per groups
- Contrasting mean patient and physician ratings with the value of the DSI for this case

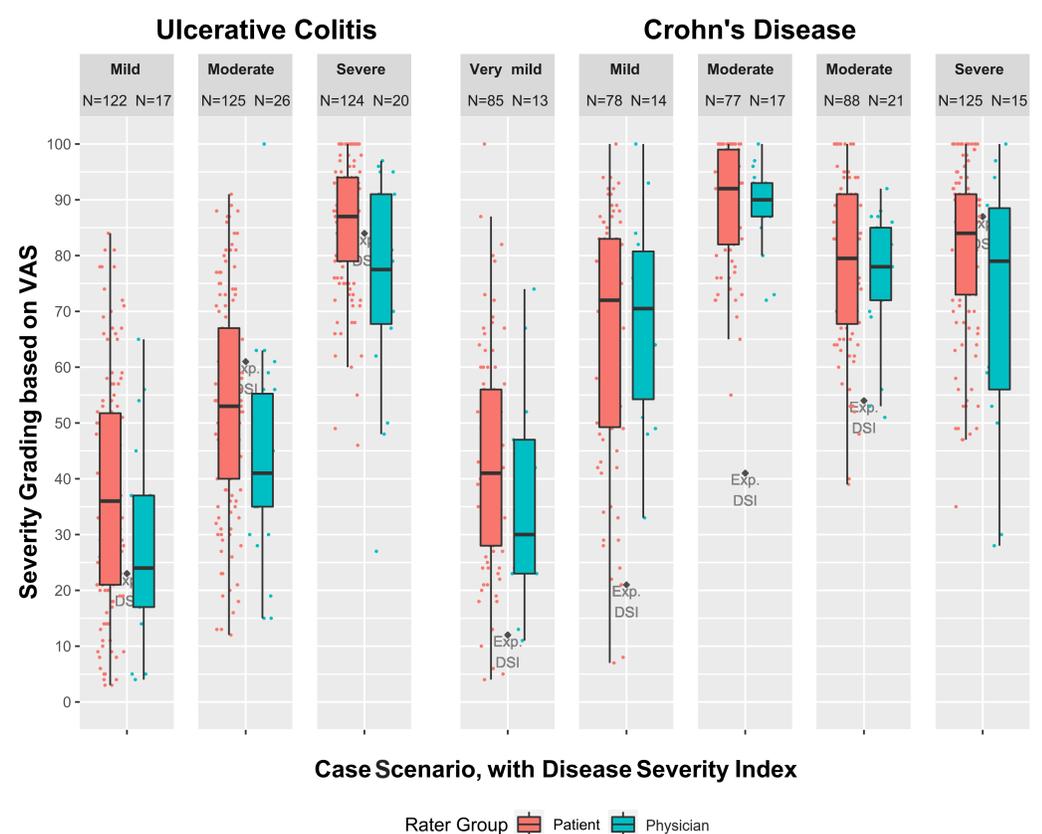


Figure: Severity grading by rater group and case scenario

Conclusion

Patient and physician ratings of the case scenarios of Crohn's disease were very similar on average. Lower physician scores were given for UC cases, and mild and severe CD cases, but the overall trend remained intact. In contrast, there was no apparent correlation between global severity ratings of both patients and physicians and the DSI for a given case. This will need further analysis.