

The IMPACT of Inflammatory Bowel Diseases (IBD)

EUROPEAN FEDERATION OF CROHN'S AND ULCERATIVE COLITIS ASSOCIATIONS (EFCCA)

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EFCCA RECOMMENDATIONS

FOR DIAGNOSING IBD:

- ⊕ Maintain good access to IBD specialists, especially in the face of financial cuts to health services.
- ⊕ Review diagnostic protocols for those who wait over a year for diagnosis, to reduce this divergence with otherwise good standards.
- ⊕ Investigate and find methods to prevent presentation to emergency care, experienced by a majority, before diagnosis.
- ⊕ Work with emergency care colleagues to raise awareness that the majority of people with IBD are treated in this department.

FOR HEALTH CARE AND TREATMENT:

- ⊕ Maintain and develop good IBD health service standards, in line with published guidelines.
- ⊕ High hospital admission represents a poor patient experience, an urgent opportunity for improvement, and significant morbidity. Reducing this burden may somewhat counterbalance the cost of new IBD treatments – it may pay to treat with innovative therapies.
- ⊕ Ensure that use of corticosteroids is in line with ECCO guidelines, and that the full range of treatment options are considered, according to comparative risk-benefit profiles.

FOR HEALTH SERVICES:

- ⊕ Improve access as well as provision, of specialist IBD healthcare professionals.
- ⊕ Increase the duration and frequency of specialist consultations.
- ⊕ Improve consultation techniques (for both parties), to ensure depth and coverage of issues, so that no important information is omitted.

FOR RELATIONSHIPS:

- ⊕ The impact of IBD on relationships should be considered by healthcare professionals.
- ⊕ Healthcare professionals should actively sign-post patients to national IBD associations.

FOR DAILY LIFE:

- ⊕ Management plans should include assessment and management of the key three symptoms: fatigue, urgency, and pain.
- ⊕ Success criteria should focus on effective management of symptoms, as well as IBD as the root cause.
- ⊕ Management plans should include assessment of the wider symptomatic impact of IBD on everyday life, as well as the clinical context.

FOR WORK AND EDUCATION:

- ⊕ Good management of IBD supports employment. The cost of new innovative treatments for IBD may be counterbalanced by improved employment and reduced social costs.
- ⊕ Effective medical consultation should address the patient's full life context – including work.
- ⊕ A patient's employment and educational aspirations should be regarded as goals and success criteria.
- ⊕ Flexible, supportive, and non-discriminatory work practices are required. Those who face discrimination must be supported in challenging this.

