

IBD delivery of care during COVID-19 response: a review of telephone clinics for IBD patients in a large teaching hospital

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On 11 March 2020, COVID-19 infection was declared a pandemic by the World Health Organization and comprehensive strategies to reduce the effects of the pandemic were recommended. In keeping with local guidelines for COVID-19, the COVID-19 ECCO Taskforce advised IBD patients should not come to clinical settings for appointments, where possible. IBD clinics were therefore rapidly restructured with a shift toward telephone consultations. Our study attempted to identify whether these changes would impact patient care and which patients would be appropriate to follow in telephone clinics going forward.

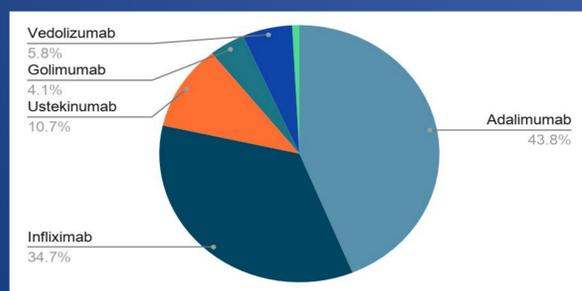
Methods

We created a survey to be filled in following each telephone appointment. It included demographics of the patient, medication use, physician's global assessment, and investigations requested. Patient's were asked whether they found the telephone option acceptable/preferable. We retrospectively looked at appointments during a similar period in 2019 to gather to create a comparator cohort of patients seen face to face.

Patient preference:

69 patients were asked whether they were happy with a telephone appointment or whether they would have preferred a face to face visit. 74% of those asked were happy with their appointment over the phone. Many patients commented that they were happy with their appointment being over the phone when they were well, but would prefer to still have the option of a face to face if they were to become unwell.

Characteristics of those happy with telephone appointments (n=51)		Characteristics of those not happy with telephone appointments (n=18)	
Gender		Gender	
M	19 (37%)	M	7 (38.8%)
F	32 (63%)	F	11 (61.2%)
Age		Age	
-18-30	18 (35%)	-18-30	3 (16.6%)
-31-45	19 (37%)	-31-45	6 (33.3%)
-46-60	11 (22%)	-46-60	3 (16.6%)
->60	3 (6%)	>60	6 (33.3%)
UC	21 (41.2%)	UC	2 (11%)
Crohns	30 (58.8%)	Crohns	16 (89%)
Biologic use	35 (68.6%)	Biologics use	11 (61.1%)
No. appointments in previous 12 months		No. appointments in previous 12 months	
- 0-3	44 (86.3%)	-0-3	10 (55.5%)
- 4-6	4 (7.8%)	-4-6	6 (33.3%)
- 6 or more	3 (5.9%)	-6 or more	2 (11.2%)



Biologic use in 2020

Discussion:

During a four week period from May 17 to June 20 2020 we saw a total of 214 IBD patients between four IBD clinics. Of these, 65% had Crohns disease. The physician's global assessment was documented for each patient. 113 were deemed to be normal or in clinical remission, accounting for 53% of consultations. 58 had mild active disease, 18 moderate active disease and 1 was deemed to have severe active disease (UC). Regarding medication, 56.5% of patients attending during this period were on biologic therapy. Investigations were requested for surveillance in 62% and de-escalation of therapy in 4%. 20% had investigations ordered in anticipation of escalation of treatment. These findings were similar to those from 2019. Many patients commented that when unwell they would prefer to be seen face to face. From 125 telephone consultations where doctors were asked their opinion on telephone clinics, doctors documented that a face to face consultation would not have altered care in 110 of these.

Conclusion:

It was important to rapidly reconfigure our IBD service to ensure continued high quality care was delivered to those in the out-patient setting, in an attempt to minimize their risk of contracting COVID-19. This review has demonstrated comparable care was provided to the same amount of patients both years, and that non face to face clinics are preferable to a majority of our IBD patients, both from a patient and medical perspective.

Summary of total appointments reviewed:

	2020	2019
In clinic		
Total number seen	214	173
DNAs	24 (10%)	27 (13.5%)
UC	72 (33.6%)	55 (31.8%)
Crohns	139 (65%)	133 (62.2%)
Demographics		
Sex		
-M	91 (42.5%)	55 (31.8%)
-F	123 (57.5%)	147 (68.2%)
Age range		
- 18-30	33 (15.4%)	28 (17.2%)
- 31-45	91 (42.5%)	76 (43.9%)
- 46-60	54 (25.2%)	49 (28.3%)
- >60	36 (16.9%)	46 (26.5%)
PGA		
- Normal	113 (52.8%)	99 (57.2%)
- Mild	58 (27.3%)	46 (26.6%)
- Moderate	18 (8.4%)	20 (11.6%)
- Severe	1 (0.5%)	3 (1.4%)
No. appointments previous 12 months		
- 0 – 3	185 (86.5%)	156 (90.2%)
- 4 – 6	23 (10.8%)	44 (25.4%)
- >6	10 (5.7%)	3 (1.7%)
Medication use		
Steroids/ antibiotics	18 (8.4%)	24 (13.8%)
5-ASA	51 (23.8%)	56 (32.4%)
Azathioprine	18 (8.4%)	31 (17.8%)
Biologics	121 (56.5%)	99 (57%)
Nil medication	12 (5.6%)	28 (16.2%)
Outcome of clinic appointment		
Ongoing surveillance	133 (62.2%)	101 (58.3%)
De-escalation treatment	8 (3.7%)	13 (7.5%)
Escalation treatment	44 (20.6%)	48 (27.7%)
Admission	1 (0.5%)	0 (0%)
Investigations requested		
Routine bloods	148 (69.2%)	114 (68.9%)
Urgent bloods	27 (12.6%)	42 (24.2%)
Faecal calprotectin	36 (16.8%)	37 (21.4%)
Endoscopy	42 (19.6%)	50 (28.9%)
Radiology	23 (10.7%)	9 (5.2%)