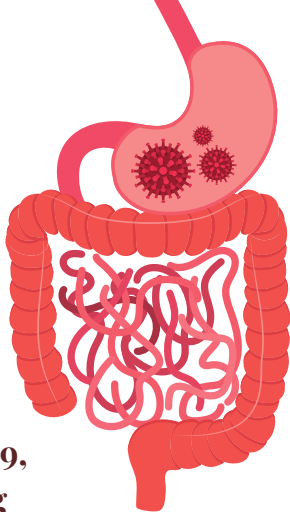


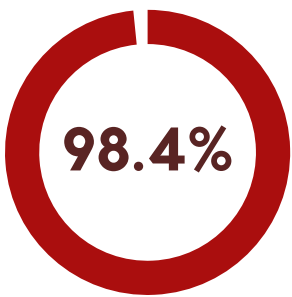
# IBD & COVID-19



The current consensus is that IBD itself is not a risk factor for COVID-19, but that the risk lies mainly with the use of IBD medications, including corticosteroids, immunomodulators and biologic therapies.



of experts agree that **vaccination is not** associated with the onset or exacerbation of IBD symptoms



of experts agree that people with IBD, active or not, on immune-modifying therapies or not, **should get** the COVID-19 vaccine



of experts agree that people with IBD are at **no more risk** of infection than the general population

Of particular concern is the safety of those with compromised immune systems. Inflammatory Bowel disease (IBD) is itself caused by a disordered immune response, with the most effective medical therapies being immune suppressing or modifying. As such, the risk of COVID-19, virus related outcomes, and appropriate management of IBD patients during the global pandemic is of immediate concern to gastroenterologists worldwide. We have worked to put together the most recent information on IBDs relationship to COVID.

Although immunomodulators, like Humira or Remicade, can weaken the immune system, there is a higher health risk in having an active flare-up, or regression from remission, while infected with COVID-19

*there is currently no evidence of an association between IBD therapies and increased risk of COVID-19.*

The current consensus among experts is that medication regimens should be continued in the time of COVID

Where possible, high-dose systemic corticosteroids should be avoided

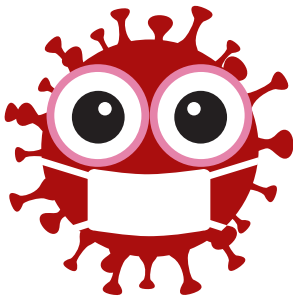
however

If a patient develops COVID-19, immune suppressing medications should be withheld until infection resolution

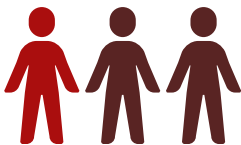


## WHERE THE RISK LIES

Having an active flare up can increase the risk for developing pneumonia or adverse outcomes when infected with COVID-19



Though there is currently no evidence of SARS-COV-2 exacerbating underlying IBD, it is now well recognized that many patients with COVID-19 will develop GI complaints



1/3 of people with COVID-19 report GI symptoms including loss of appetite, diarrhea, nausea/vomiting, and abdominal pain

The involvement of the digestive system in COVID-19 is still being understood and researched. What is clear, is that COVID has the capability to impact the gut and cause GI related distress. The way this interacts with IBD symptoms is unknown.

IBD University is working to keep the most updated research available. For more information or to see where we got all of our information please see any of the following sources below:

IBD & COVID-19  
Managing IBD in a Pandemic  
Clinical Observations  
Prevention & Management

Digestive System & COVID  
Implications for Gastroenterology  
Vaccination Recommendations