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Systematic review of the impact of psychological morbidity and associated risk factors in young people with inflammatory bowel disease

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Background: Psychological morbidity in young people living with inflammatory bowel disease (IBD) is increased, but the risk factors and impact of psychological morbidity are unclear. The aim of this study was to systematically review the risk factors and impact of psychological morbidity in young people with IBD.

Methods: Electronic searches for English-language articles were performed with keywords relating to: psychological morbidity according to DSM-IV and subsequent criteria; young people; and IBD in the MEDLINE, PsychInfo, Web of Science and CINAHL databases for studies published from 1994-September 2014.

Results: 1443 studies were identified by database searching, of which twenty-nine studies were included. The majority of studies measured depression and anxiety symptoms, with a small proportion examining externalising behaviours. Identifiable risk factors for psychological morbidity included: increased disease severity, lower socio-economic status, use of corticosteroids, family/parental factors and possibly an older age at diagnosis. The impact of psychological morbidity was wide-ranging and included: abdominal pain, sleep dysfunction, use of psychotropic drugs, non-adherence to medication, and negative illness perceptions.

Conclusions: This systematic review has demonstrated the varied impact of psychological morbidity, highlighting the need for psychological interventions to improve outcomes in young people with IBD. Easily identifiable risk factors exist and provide an opportunity to develop IBD screening tools and targeted therapies for young people with IBD. Future research should focus on groups under-represented in this review, such as those with: ulcerative colitis, surgical interventions, severe disease, those from ethnic minorities and young people aged 16-24 years.