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SIRS, We are grateful to Qin and colleagues for their Comments on our systematic review examining the risk factors and impacts of psychological morbidity in young people with inflammatory bowel disease (IBD). We agree that a complex inter-relationship is likely to exist between disease activity and its severity, illness perceptions and psychological morbidity. Our systematic review synthesises the currently available evidence and suggests that this relationship extends further for young people with IBD, into other important areas of disease management, such as medication non-adherence. A comprehensive synthesis of the findings with statistical analyses, quoted from all included studies where available, is provided in our review. Detailed further information, including sample sizes is available in the supplementary on-line material.

Our review outlines the possible impacts and risk factors for psychological morbidity in young people with IBD. This will aid healthcare professionals, is clinically important, and also increases understanding regarding the effect of psychological morbidity on the clinical endpoints widely used in clinical trials to evaluate medical interventions. Although evaluation of the efficacy of psychological treatments in adults and young people was not an objective of this review, we agree that further robust evaluation of psychological interventions, which currently show promise in young people with IBD, is needed.

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