<b>Conclusions:</b> Based on these results, there are high levels of anxiety and depression in children with IBD,	
and their treatment often starts after their initial IBD diagnosis. Antidepressants, primarily SSRIs, are	
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is needed for pediatric IBD patients at URMC and that mental health services are being underutilized in	
the pediatric IBD population. Future directions include developing mental health screening measures	
specifically for pediatric IBD patients. Prospective, longitudinal studies are needed to examine whether	
preemptive mental health interventions lessen the risk of developing psychopathology as an IBD patient.	
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