## STRONG CHILDREN'S RESEARCH CENTER – Summer 2021

## Incidence of Elevated Creatinine in Pediatric Inflammatory Bowel Disease Patients Treated with Infliximab

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## **Background** plications in pediatric IBD

hat renal complications in pediatric IBD patients are a, however, the etiologies of these complications spital (GCH), there has been an increase in renal X) with elevated creatinine.

study was: 1) to see if IFX has a negative impact on ) to see if pediatric IBD patients who are treated with ne and whether this increase is sustained over time.

61 pediatric patients between the ages of 6 months tween 2016 to 2021 and receiving IFX at Golisano atric Gastroenterology. Data collected from medical MI, diagnosis date, IBD type, mesalamine use, use, date of first IFX infusion, baseline serum e, corresponding IFX level, and length of time on IFX. Patients were subdivided into 3 cohorts: No sCr Cr Elevation. Within these sub-groups, transient vs. creatinine was determined by comparing baseline Cr uding cystatin C was collected on a sub-group of nephrology for elevated Cr levels. T- tests were used categorical variables.

the analysis. Approximately 42% and 20% of the of 0.2 and 0.3 respectively. In both cohorts, Cr ly one third having a sustained increase (>3 months). Ostly male and this occurred, on average, a year after nes, immunomodulators, NSAIDs, and steroids had no

42% of pediatric IBD patients who were receiving of 0.2 during their time of treatment. In only one crease for over 3 months. Based on this, Infliximab

most likely is not associated with sustained Cr elevation, and transient elevations may be expected during their treatment course. Patients who have a sustained increase for over 3 months, may then warrant referral to Pediatric Nephrology for further investigation. These findings may be reassuring to clinicians who are prescribing IFX to IBD patients to induce and maintain remission.