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A NARRATIVE REVIEW EXPLORING THE IMPACT OF PSYCHOLOGICAL AND PHYSICAL SYMPTOMS ON WORK PARTICIPATION AMONG PATIENTS WITH INFLAMMATORY BOWEL DISEASE (IBD)

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Background:

IBD is a relapsing-remitting chronic inflammatory condition. [(Ford, 2013), (Fell, 2016), (NICE, 2019), (Magro, 2017)]. This includes ulcerative colitis and Crohn's disease and typically presents during late adolescence and early twenties [(Molodecky, 2012), (Mozdiak, 2015), (Rosen, 2015)], with physical and psychological symptoms impacting daily functioning, including work.

Aims:

To assess the impact these symptoms have on work participation in employed IBD patients.

Methods:

Three databases were searched (Medline, EMBASE and PsychInfo). Database results were screened by title, abstract and full text. Data extraction table was created for included studies.

Results:

Thirteen studies from the 425 returned met the inclusion criteria. Fatigue, diarrhoea, perianal fissures, faecal incontinence and abdominal pain were the main physical symptoms associated with higher levels of work productivity impairment with increased absenteeism and presenteeism, limiting career opportunities, workplace location and career progression. Anxiety and depression associated with living with IBD, were found to lead to impaired work productivity, however, less frequently impact work capacity and work functioning. Medication used for IBD management can reduce work productivity impairment through reducing disease burden and severity.

Conclusion:

Physical and psychological IBD symptoms can negatively impact work participation through increased absenteeism, presenteeism, overall work productivity impairment and limitations with career progression. This review illustrates there's a need to promote improved workplace support for patients with IBD and the importance of long-term treatment and management to reduce symptom severity. Future research should assess the impact of IBD symptoms on work productivity as a primary outcome.

References:

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