### INTRODUCTION

Irritable bowel syndrome with constipation (IBS-C) is a chronic disorder of gut motility that has a significant impact on the quality of life of affected individuals. The COVID-19 pandemic has had a significant impact on patient outcomes and access to healthcare, but its impact on patients with IBS-C is unknown.

### OBJECTIVE

To examine disease burden and care-seeking behavior of patients with IBS-C during the pandemic.

### METHODS

#### Data Collection

- Surveys were fielded for 1 week each month from August 2020 through December 2020.
- Surveys were conducted via two observational, cross-sectional, online surveys of US adults (aged ≥18 years).

#### Survey Design

- An electronic survey (Electronic questionnaire for specific medical condition, EQ-5D-5L) developed by the study authors, included a large health maintenance organization covering several questions to be answered by participants over demographics, current healthcare status, health-related quality of life (Generalized Anxiety Disorder scale (GAD-7), Patient的功能性 Rating Questionnaire (FRQ), and veterans RAND 12 items (VR-12).

#### Cohort Definition

- The IBS-C cohort was selected based on the Rome IV criteria (referred to as the “IBS-C Rome IV cohort” or “patients”).
- Cohort selection was determined based on the following inclusion and exclusion criteria.
  - Inclusion criteria: (IBS-C Rome IV cohort): Patients aged ≥18 years and residing in the United States who reported IBS-C Rome IV criteria for IBS-C, by survey.
  - Exclusion criteria: Patients who self-reported IBS-C, or diarrhea in the last 7 days, or those with a condition that could simulate IBS-C (IBS-C Rome IV criteria) for IBS-C, by survey.

#### All-Cause Healthcare Resource Utilization

A numerically greater proportion of patients in the IBS-C Rome IV cohort were routed to the IBS-C-specific module. Patients in the IBS-C Rome IV cohort were more likely to report having seen their healthcare provider (97.4%) than those in the controls (94.2%); 43.2% versus 2.3% of patients in the IBS-C Rome IV cohort had a comorbid condition checklist (n=130) before fielding began in August 2020.

#### Anxiety and Depression

The IBS-C Rome IV cohort reported significantly more moderate to severe anxiety than controls (41.5% vs. 26.2%, p<0.001) and more moderate to severe depression than controls (44.3% vs. 31.3%, p<0.001) [anxiety: GAD-7 score ≥11; depression: PHQ-9 score ≥10].

### RESULTS

#### Total population

- The mean age of patients with IBS-C was 45.1 years, with the majority being female (71.5%).
- Participants who did not select these conditions continued with the survey and self-reported those conditions.
- Prior to enrolling based on self-report.

#### Symptom Experience “In the Past 7 Days”

- At 76.9%, “abdominal discomfort” was the most frequently reported symptom experienced by patients with IBS-C (Table 3).
- At 67.4%, “straining while having a bowel movement” was the symptom most frequently reported by patients with IBS-C.

#### Medication Use

- 19.2% of patients with IBS-C reported currently taking a prescription medication, 72.6% never asked their HCP for a prescription medication for their IBS-C symptoms, and 60.0% never asked their HCP for advice on treating their IBS-C symptoms.

#### CONCLUSIONS

- The COVID-19 pandemic has had a significant impact on patient outcomes and access to healthcare, but its impact on patients with IBS-C is unknown.
- The IBS-C Rome IV cohort reported significantly more moderate to severe anxiety than controls (41.5% vs. 26.2%, p<0.001) and more moderate to severe depression than controls (44.3% vs. 31.3%, p<0.001) [anxiety: GAD-7 score ≥11; depression: PHQ-9 score ≥10].

### DISCUSSIONS

This study was supported by AbbVie Inc., Madison, NJ, USA and Ironwood Pharmaceuticals, Inc., Boston, MA, USA; the International Foundation for Gastrointestinal Disorders, Milwaukee, WI, USA; and Aecum Health Research Institute, Ann Arbor, MI, USA.

### REFERENCES


### LIMITATIONS

- Data were self-reported and participants were limited to those with computer access.
- Bowel and/or abdominal symptoms could be attributed to more than one IBS-C condition.
- Some patients had a small sample size and must be interpreted with caution.

### CONCLUSIONS

- There remains a considerable disease burden and unmet need for patients with IBS-C, patients suffer from multiple bothersome symptoms and low rates of prescription medication use.
- COVID-19 seems to have worsened IBS symptoms for many patients.

### DISCUSSIONS

This study was funded by AbbVie Inc., Madison, NJ, USA and Ironwood Pharmaceuticals, Inc., Boston, MA, USA; the International Foundation for Gastrointestinal Disorders, Milwaukee, WI, USA; and Aecum Health Research Institute, Ann Arbor, MI, USA. All authors met ICMJE authorship criteria and neither financial nor non-financial conflicts of interest were declared.

### REFERENCES