

# Unmet healthcare needs among people with inflammatory bowel disease: A national cross-sectional population-representative study

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**Background:** Inflammatory bowel disease (IBD) is a chronic inflammatory disease primarily affecting the gastrointestinal tract. Despite treatment with the current standards of care, many IBD patients experience relapsing, remitting, and disabling bowel symptoms and significant disease complications.

**Objectives:** (1) Compare unmet healthcare needs of people with and without IBD. (2) Determine whether accessing regular medical care mediates the association between IBD and unmet healthcare needs.

**Methods:** We used the 2014 Canadian Community Health Survey, a population-representative national cross-sectional survey conducted by Statistics Canada. Respondents with a non-IBD bowel disorder or aged 18 or younger were excluded. Survey weights were used for descriptive statistics. We used multilevel logistic regression to compare perceived unmet healthcare needs among individuals with and without IBD, clustering by health region and controlling for age, immigration status, race, home ownership, marital status, annual household income, education level, and number of chronic conditions. In a second model, we additionally controlled for having a family doctor, specialist, and/or psychologist to assess if regularly accessing medical care mediated the association between IBD and unmet healthcare needs.

**Results:** Among the 632 IBD and 54,341 non-IBD eligible survey respondents, people with IBD were more likely to have an unmet healthcare need (OR: 1.42, 95% CI 1.33-1.76); 17.8.% of people with IBD had an unmet healthcare need, compared with 11.4% of those without IBD. Adjusting for regular access to medical care attenuated the association between IBD and unmet healthcare needs (OR: 1.32, 95% CI 1.05-1.64). Reasons for unmet healthcare needs differed among those with and without IBD.

**Conclusion:** People with IBD are more likely to have an unmet healthcare need that was partially mediated by access to healthcare professionals. This underscores the need for multidisciplinary healthcare teams to address the increased burden of unmet healthcare needs in the IBD population.