

## Letter: inflammatory bowel disease services during the Covid-19 pandemic - authors' reply


We thank Mungmunpantipantip and Wiwanitkit for their correspondence regarding our recent paper on the use of, and outcomes for, inflammatory bowel disease services in England during the Covid-19 pandemic.<sup>1,2</sup> We agree with them that only a proportion of patients with severe inflammatory bowel disease presented during the pandemic. This is likely due to several reasons. Firstly, patients will have stayed away due to the fear of contagion. Secondly, stay at home orders and lockdowns will have deterred patients from attending hospital. A careful public health message must be crafted to ensure that those requiring urgent medical treatment still come forward for healthcare and do not stay at home. Thirdly, there was a reduction in resources to carry out procedures (hospital beds, theatre space, ventilators, etc). Departments reduced the provision of services such as endoscopy for safety reasons. Fourthly, the availability of healthcare workers diminished due to sickness, redeployment and, in some unfortunate cases, death and disability. Finally, the prioritisation of cancer patients may have reduced the availability of scant resources for the management of IBD patients requiring care. All the above considerations will have participated in the overall reduced healthcare utilisation by inflammatory bowel disease patients during the pandemic.

### ACKNOWLEDGEMENT

*Declarations of personal and financial interests:* The authors' declarations of personal and financial interests are unchanged from those in the original article.<sup>2</sup>

### LINKED CONTENT

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### REFERENCES

1. Mungmunpantipantip R, Wiwanitkit V. Letter: inflammatory bowel disease services during the COVID-19 pandemic. *Aliment Pharmacol Ther* 2022;55:1063.
2. Deputy M, Sahnun K, Worley G, Patel K, Balinskaite V, Bottle A, et al. The use of, and outcomes for, inflammatory bowel disease services during the Covid-19 pandemic: a nationwide observational study. *Aliment Pharmacol Ther*. 2022;55:836–846.

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