



# UC-CARE - How is it useful in Slovenian clinical practice?

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The global burden of inflammatory bowel disease (IBD) continues to rise, and Slovenia is no exception. Nevertheless, reliable epidemiological information in Slovenia remains scarce. To improve data collection, Slovenia joined the European Registry of Inflammatory Bowel Disease (UR-CARE) in 2019 (1). Since then, the majority of national IBD centers have been actively contributing to the registry.

Although clinicians are highly engaged in entering patient data, current estimates suggest that the registry covers only around 75% of all IBD cases. By December 2024, about 4,588 patients had been registered: 48% with Crohn's disease (CD), 49% with ulcerative colitis (UC), and 3% with unclassified colitis.

Data from UR-CARE have already served as the basis for several significant publications (2,3). One nationwide analysis compared the use of biologics in two academic versus four non-academic centers. The disease phenotype was consistent across both settings, and no meaningful differences were found in the distribution of treatment episodes with TNF-alpha inhibitors (60% vs. 61%), vedolizumab (24% vs. 23%), or ustekinumab (17% vs. 16%) ( $P=0.949$ ). The interval from diagnosis to the first biologic initiation was also comparable (11.3 vs. 10.4 months,  $P=0.2$ ). These findings support the conclusion that biologic treatment strategies do not differ between

academic and non-academic centers, reinforcing the feasibility of decentralized IBD care (2). Another study used registry data to examine persistence of first-line biologics, comparing anti-TNF agents, the anti-integrin vedolizumab, and the IL-12/23 inhibitor ustekinumab. In Crohn's disease, persistence was broadly similar across the three drug classes. In ulcerative colitis, however, vedolizumab showed higher treatment persistence than anti-TNF agents (3).

The UR-CARE registry provides opportunities for real-time data analysis, making it a valuable instrument for evaluating and optimizing IBD care at the national level.

## References:

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