CARL ERIKSSON (1981) received a M.D. degree in 2007 from the Faculty of Medicine at Umeå University. He did his internship at Örebro University Hospital received a specialist diploma in internal medicine in 2015 and is currently working as specialist registrar at the Division of Gastroenterology, Department of Medicine, Örebro University Hospital. The work presented in this thesis began in the end of 2015 with associate professor Jonas Halfvarson as a supervisor.

The two main forms of inflammatory bowel disease are Crohn's disease and ulcerative colitis. These are chronic, idiopathic, inflammatory disorders mainly affecting the gastrointestinal tract although systemic complications that may involve almost any organ system frequently occur. This thesis demonstrates a fivefold rise in the incidence and a tenfold increase in the prevalence of ulcerative colitis within the primary catchment area of Örebro University Hospital during 1963-2010. In addition, anaemia was found to be a common complication of inflammatory bowel disease, particularly in Crohn's disease, with a prevalence of approximately 20%. The increasing number of patients with ulcerative colitis will pose a significant challenge to gastroenterologists and gastrointestinal surgeons in Sweden. However, in parallel with the increase of ulcerative colitis in Örebro, the prognosis, in terms of risk for colectomy within 10 years from diagnosis, improved and the results of this thesis support that earlier and more widespread use of thiopurine drugs have contributed to the decrease in colectomies. Correspondingly, the pharmacological armamentarium of IBD has been augmented with several biological agents during recent years. This thesis shows that vedolizumab, a new biologic agent targeting leukocyte migration to the gut, is safe and has a clinical effectiveness in Swedish routine care.

2018

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Doctoral Dissertation

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