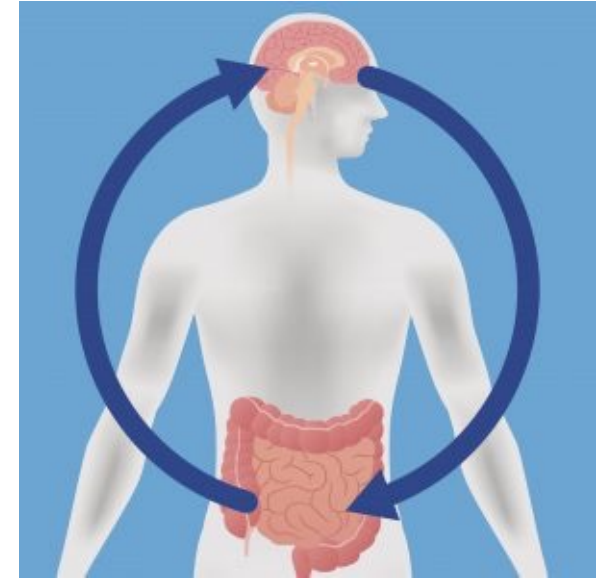


IBD and Psychosocial Considerations

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PEDIATRIC PSYCHOLOGIST



Outline

Brief overview of role of psychology in IBD Multidisciplinary Clinic

Psychosocial Effects of IBD

- Depression , Anxiety

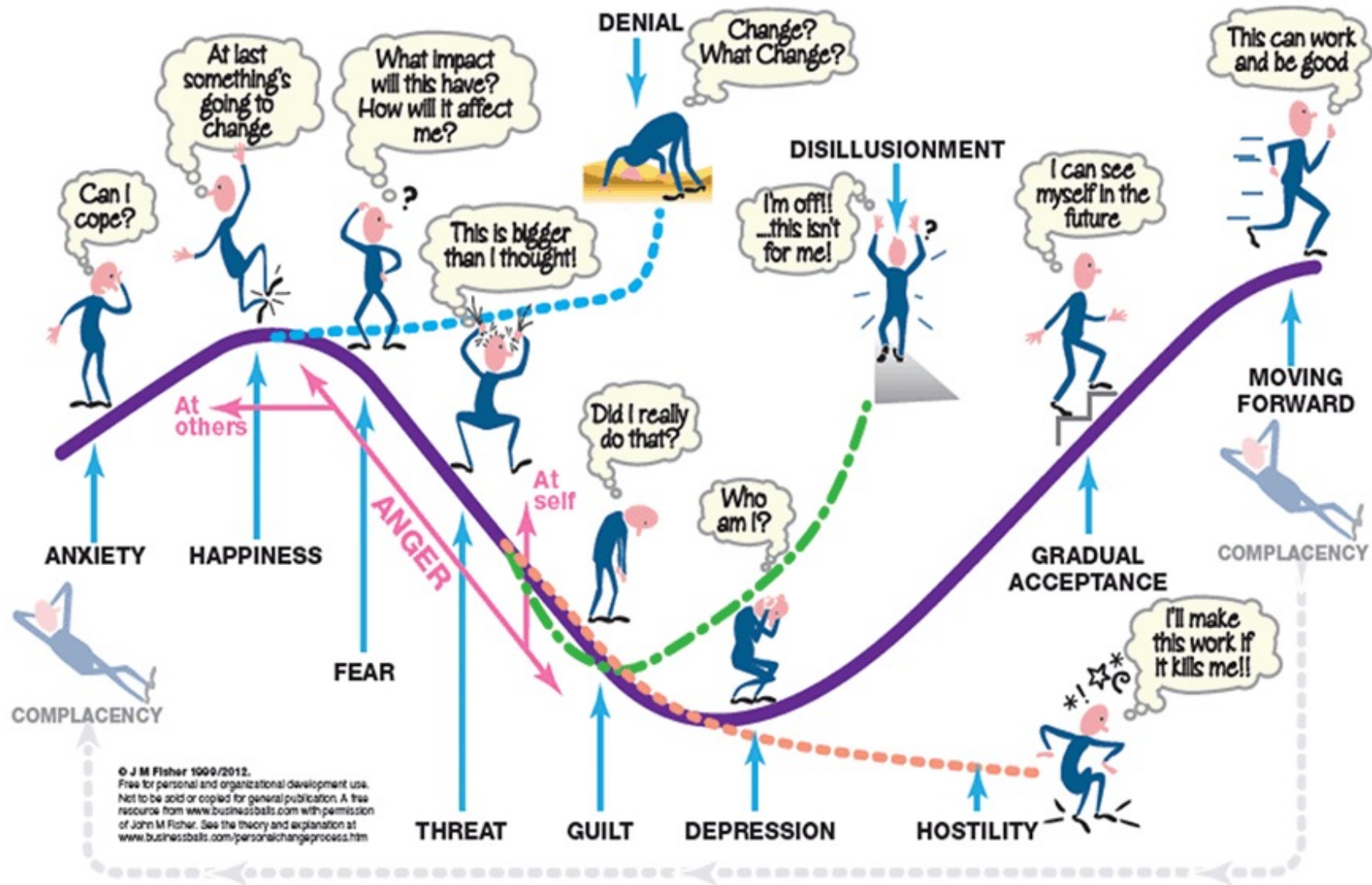
Optimizing Coping with IBD

Addressing Transition

Psychosocial Interventions for Youth with IBD

Resources for Families

It's an adjustment process ...



Psychology Services

Coping with a new or existing diagnosis of IBD

IBD-related stress and pain management

Staying involved in school, activities and social life

Decreasing anxiety, mood or behavior concerns

Overcoming fears about swallowing pills, receiving shots/injections, medical exams, or other medical procedures

Following an IBD treatment plan

Support with transition to adult medical providers

Psychosocial Effects of IBD

IBD can affect **many areas of your life**, such as:

Anxiety

Depression

Low self-esteem/self-efficacy

Lower quality of life

Poorer social functioning



School



Work



Relationships



Physical activities



Finances



Travel

Depression

Increased risk for behavioral emotional challenges,
depression rates up to 25%

Triggers:

- Physical symptoms, particularly chronic pain
- Poor body image (steroid induced weight gain)
- Distress secondary to school absences or loss of social opportunities



Anxiety

Youth with IBD are at higher risk for anxiety

Triggers for anxiety:

- Needle/ injection phobia
- Pill swallowing
- Anticipatory pain
- Discussing or disclosing IBD diagnosis
- Unpredictable disease course/ Flaring



Optimizing Coping with IBD

It is normal to have **many types of emotions** as you live with IBD



Individual: working to actively work through situational distress (e.g., diagnosis or flare related) vs. extended periods of impaired functioning

Social: decreasing social withdrawal, peer challenges, limited participation in social activities, school attendance

Family: positive family coping and stress management

School: 504 optimization, anticipatory guidance with transitions

Transition and “Graduating” to Independent IBD Management

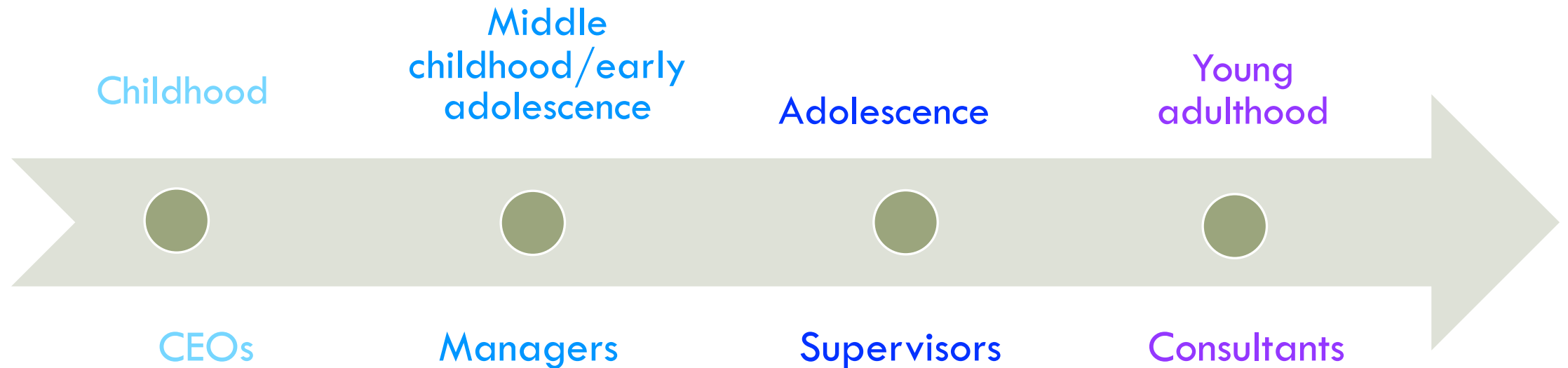
Gradual, developmentally appropriate , individualized

Autonomy in health care typically develops later than autonomy in other developmental areas

Parents are critical stakeholders

Provide anticipatory guidance and frequent communication about transition

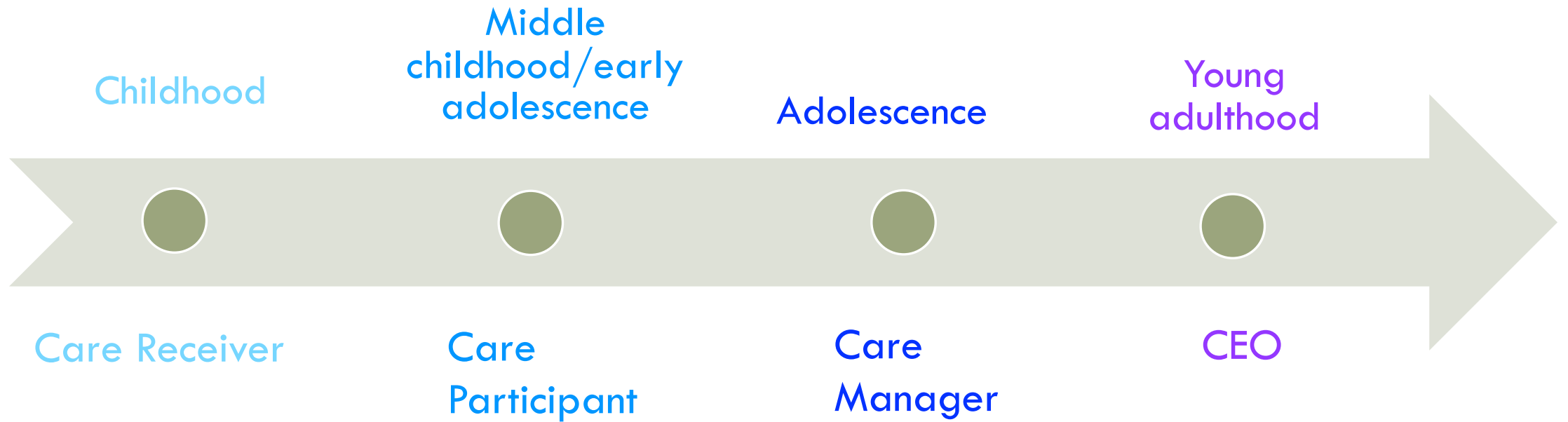
Evolving Roles of Parents



Stepped approach towards transition skills acquisition:

- Observation
- Partial participation
- Managing tasks independently with prompting

Evolving Role of Youth



Interventions

**I FIGHT FOR
MY HEALTH EVERY DAY
IN WAYS
MOST PEOPLE
DON'T UNDERSTAND.
I'M NOT LAZY.**

**I'm a
Warrior**

Cognitive behavioral therapy (CBT)

- **Relaxation techniques**
- **Visualization and guided imagery**

Gut-directed hypnotherapy

Biofeedback

Enhancing positive family communication

Support groups

Resources for Families

Crohn's and Colitis Foundation: The foundation is aimed at finding a cure for Crohn's disease and ulcerative colitis, and offers education programs for patients and healthcare professionals, as well as supportive services for patients and families. www.crohnscolitisfoundation.org/

The North American Society for Pediatric Gastroenterology, Hepatology, and Nutrition (NASPGHAN): The largest society in the world focused on research, education, clinical practice, and advocacy for pediatric digestive, hepatologic, and nutritional disorders. <https://www.naspghan.org/>

GI Kids: The patient outreach and education effort of NASPGHAN, aimed at promoting awareness and research of pediatric digestive and nutritional disorders. <https://www.gikids.org/>

<https://www.crohnscolitisfoundation.org/mental-health/resources-and-references>

https://societyofpediatricpsychology.org/bowel_disease