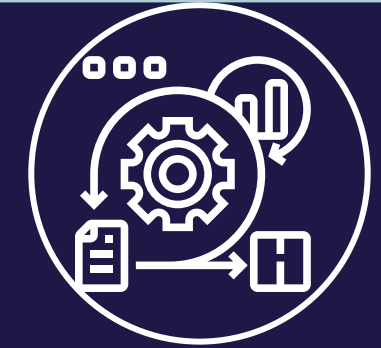




BACKGROUND

- Three-stage restorative proctocolectomy (RPC) with ileal pouch-anal anastomosis (IPAA) is commonly used for high-risk IBD patients.
- The optimal timing between Stage I and II remains unclear.



METHODOLOGY



Retrospective cohort (n=110 completed three-stage IPAA between 2012 and 2025)



- **Primary:** ≤6 vs >6 months
- **Secondary:** 9- and 12-month thresholds; continuous interval (per 3-month increase)



- **Outcomes:**
 1. Perioperative complications
 2. Long-term clinical outcomes
 3. Patient-reported functional outcomes

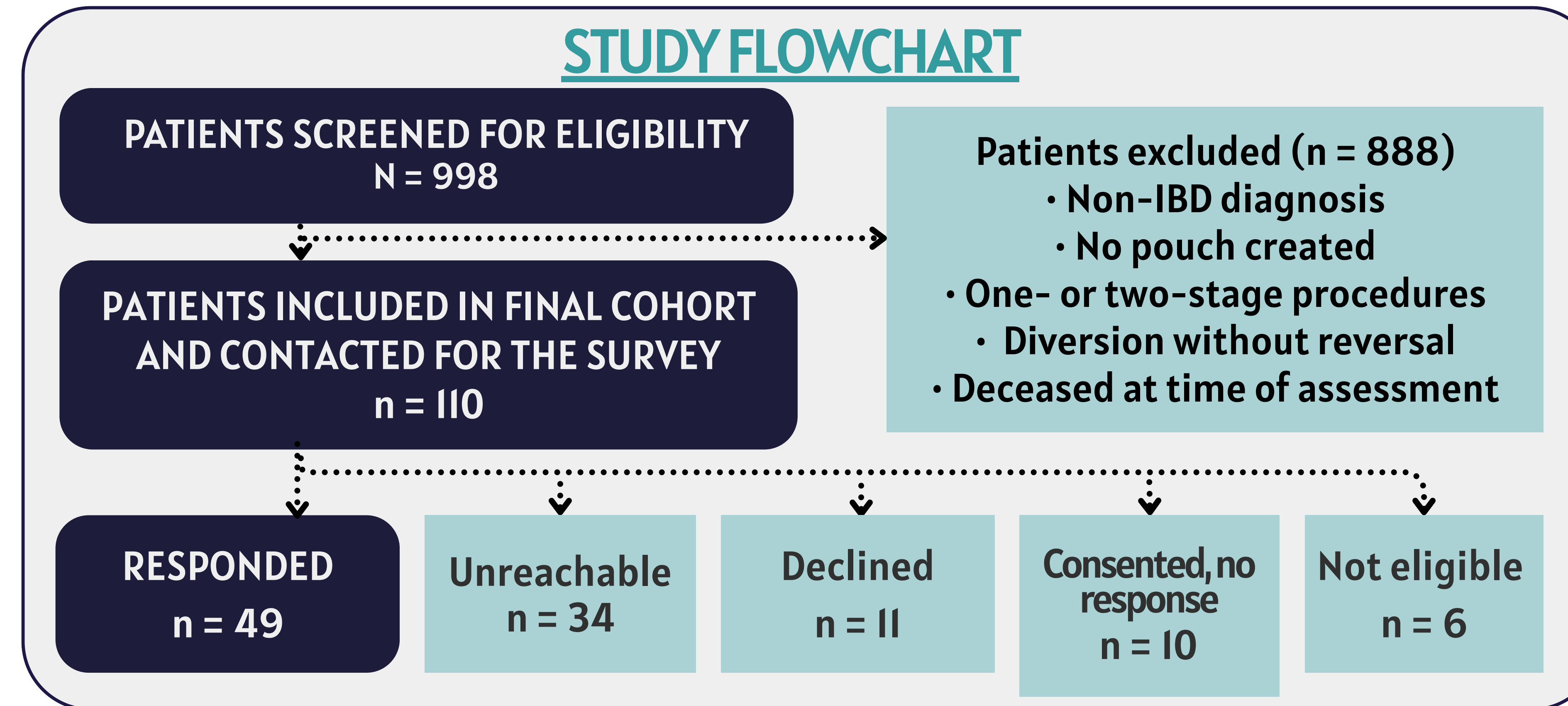


- **Statistics:**
 - χ²/Fisher exact test
 - Mann-Whitney U test
 - multivariable logistic regression



RESULTS

STUDY FLOWCHART



BASELINE CHARACTERISTICS

Patient characteristics	≤6 months (n=59)	>6 months (n=51)	P value
Age, years	40 (33.5–54.5)	37 (30.5–48.0)	0.144
Sex, male	37 (62.7%)	32 (62.7%)	0.997
Obesity	2 (3.4%)	8 (15.7%)	0.042¹

PATIENT-REPORTED FUNCTIONAL OUTCOMES

	≤6 months (n=23)	>6 months (n=26)	p-value
IPSSI, mean (SD)	42.7 (22.5)	45.7 (28.4)	0.683
CGQL score, median	7.67 (6.33 - 8.17)	7.33 (5.83 - 8.33)	0.802

CD – Clavien-Dindo. ¹ – Fisher's exact test. Continuous variables are presented as median (IQR); categorical variables as n (%).



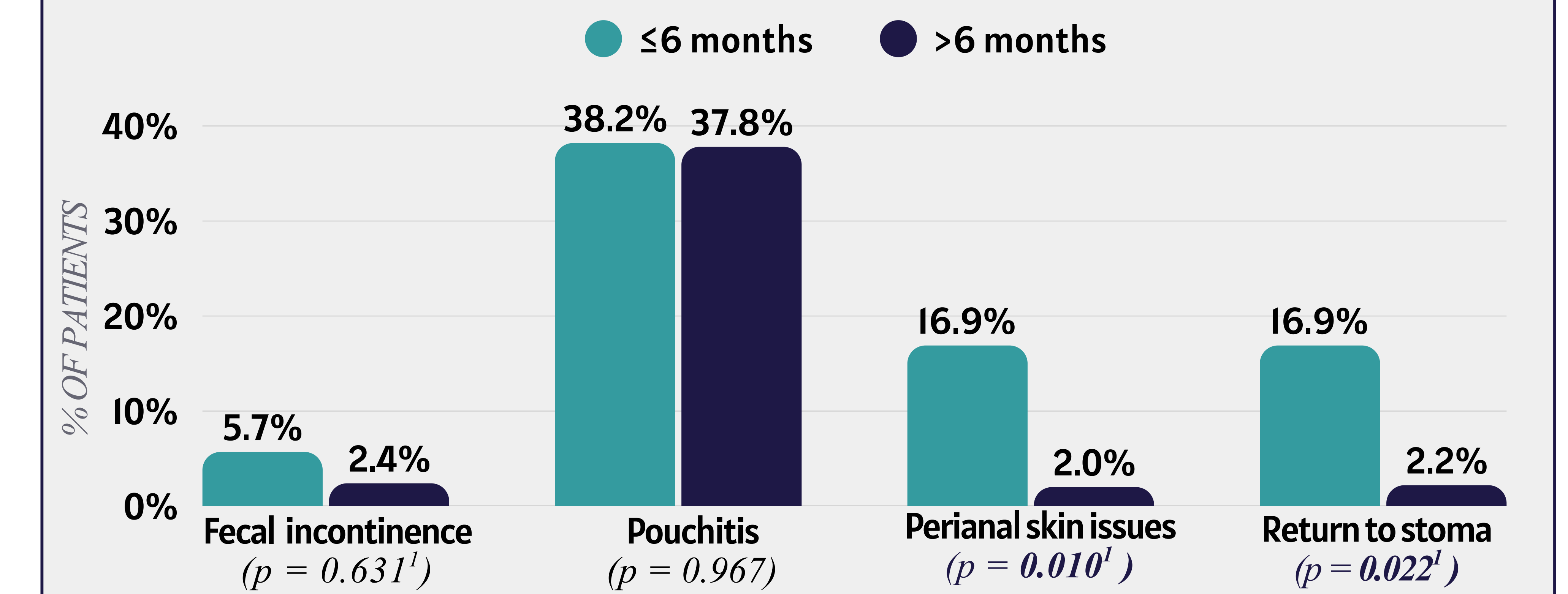
KEY FINDINGS

- ✓ Comparable Stage II perioperative outcomes
- ✓ Comparable long-term pouchitis and fecal incontinence rates
- ✓ Comparable patient-reported functional outcomes
- ✓ Lower odds of restoma formation with >6-month interval

STAGE II PERIOPERATIVE OUTCOMES

Outcome	≤6 months (n=59)	>6 months (n=51)	P value
30-day CD ≥III	3 (5.2%)	8 (15.7%)	0.109
90-day CD ≥III	5 (8.6%)	9 (17.6%)	0.251
Interstage readmission	15 (25.9%)	11 (21.6%)	0.600
Interstage reoperation	2 (3.4%)	3 (6.0%)	0.661

LONG-TERM CLINICAL OUTCOMES



MULTIVARIABLE ANALYSIS: STAGE I-II INTERVAL

Variable	Complication	Pouchitis	Restoma
Stage I–II interval	0.99 (0.41–2.39)	0.90 (0.37–2.14)	0.16 (0.03–0.89)



CONCLUSIONS

- Longer Stage I-II intervals were not associated with worse outcomes
- Findings support flexibility in timing of Stage II