INTESTINAL FAILURE IN EUROPE WHAT IS IT & WHAT NEEDS TO CHANGE FOR **BETTER PATIENT OUTCOMES?**



ABOUT INTESTINAL FAILURE



Intestinal failure (IF) is the rarest form of organ failure.1



In Europe, it is estimated that between 0.4 and six people per million live with SBS-IF.4



SBS-IF is caused by the surgical removal of large amounts of the small intestine due to:2,3,5



Medical conditions such as Crohn's



Vascular complications such as emboli





IF prevents the body from absorbing the nutrients, fluids and electrolytes needed for survival due to significant loss of function of their gut.2



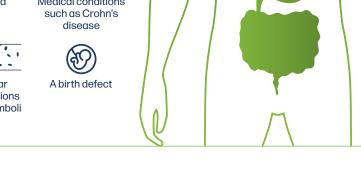
The leading cause of IF is short bowel syndrome (SBS)1, which results from loss of intestinal absorptive capacity due to underlying anatomic (extensive surgical resection) or functional (congenital, loss of functional tissue) causes.2,3



Despite the physical, emotional and financial impact on patients and carers, it is not recognised as an organ failure and the burden of the disease is overlooked. leading to fragmented care.



10-year survival rates of SBS-IF in **adults** are approximately **52-60%**^{6,7} whilst the survival rates in children were reported to be as high as 90% in a recent study.8





ATLAS

ATLAS is a group of expert clinicians, patient advocates, patient organisation leaders and Takeda that is focused on achieving the best possible treatment and care for all patients with IF. Our vision is for all IF patients in Europe to receive an equal standard of care by 2030, as documented through the improvement in reported patient outcomes. The ATLAS programme is funded and initiated by Takeda.

ATLAS - Transforming the vision - Giving chronic intestinal failure patients the care they need - a call to action.9



WE CAN CHANGE THE LANDSCAPE OF IF CARE IN EUROPE, IF WE...



Speed up diagnosis

- Increase awareness among general practitioners of the signs and symptoms of IF
- Invest in clinical education around diagnosis, appropriate care and treatment of IF patients



Provide access to the right treatments at the right time

- Enable conditional reimbursement to provide rapid access to new treatments
- Allow for multi-disciplinary team (MDT) efforts to develop comprehensive care plans
- Adhere to international best practice guidelines



Deliver holistic care for patients

- Implement national guidelines on IF care based on ESPEN guidelines
- Identify, and address, barriers to the adoption of consensus guidelines on IF care and treatment



Collaborate to share best practice and data

- Forge partnerships with regional, national and international authorities to collect, monitor and share data on IF prevalence, treatment and outcomes
- Collect and disseminate agreed epidemiology and quality standards within and between countries
- 1. PIRONI, L. et al. (2016). ESPEN guidelines on chronic intestinal failure in adults. Clinical Nutrition. 35. 247-307.
- 2. PIRONI, L. et al. (2015). ESPEN endorsed recommendations. Definition and classification of intestinal failure in adults. Clinical Nutrition. 34. 171-180.
- 3. BUCHMAN, A. et al. (2003). AGA technical review on short bowel syndrome and intestinal transplantation. Gastroenterology. 124(4). 1111-1134.
- 4. KELLY, DG. et al. (2014). Short bowel syndrome: Highlights of patient management, quality of life, and survival. J Parenteral and Enteral Nutrition. 38(4). 427-437.
- 5. O'KEEFE, SJ. et al. (2006). Short bowel syndrome and intestinal failure: consensus, definitions and overview. Clin Gastroenterol Hepatol. 4(1). 6-10.
- 6. JOLY, F. et al. (2018). Five-year survival and causes of death in patients on home parenteral nutrition for severe chronic and benign intestinal failure. Clinical Nutrition. 37(4). 1415-1422.
- 7. MESSING, B. et al. (1999). Long-term survival and parenteral nutrition dependence in adult patients with the short bowel syndrome. Gastroenterology. 117(5). 1043-1050.
- 8. PIRONI, L. et al. (2012). Outcome on home parenteral nutrition for benign intestinal failure: a review of the literature and benchmarking with the European Prospective Survey of ESPEN. Clinical Nutrition. 31(6). 831–45.
- 9. SCHNEIDER, S. et al. (2017). ATLAS Transforming the vision Giving chronic intestinal failure patients the care they need a call to action. Shire International. 2-4.

