Knowledge and Attitude Towards Use of Histologic Indices in Ulcerative Colitis in Routine Practice

Start of Block: Demographics and General Information

Q1 Where is your practice located?

* United States of America
* Canada
* Europe and UK
* Other (please specify)

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Q2 Your place of practice would best be described as:

* University academic center
* Community hospital
* Private practice
* Other (please specify)

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Q3 What is your training background?

* Received gastrointestinal pathology fellowship training
* Received non-gastrointestinal pathology fellowship training
* Received no pathology fellowship training
* Other (please specify)

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Q4 How many years have you been in practice since completing training (residency/fellowship)?

* <5 years
* 5-10 years
* >10 years

Q5 How many cases/sets of IBD colon biopsies do you see on average per week from patients with inflammatory bowel disease (IBD) in your practice?

* None
* 1-4
* 5-9
* 10-19
* >20

Q6 What is the main indication for these biopsies at your place of practice?

* Initial diagnosis alone
* Monitoring/assessing disease activity alone
* Both of the above

Q7 Do you participate in a multidisciplinary IBD clinical conference at your practice?

* No
* Yes

Q8 Which one of the following histologic scoring systems do you routinely use in your practice?

* I do not use one
* Nancy Histologic Index
* Geboes Score
* Riley/Modified Riley Score
* Robarts Histopathologic Index
* Other (please specify)

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Q9 Have you been asked by your gastroenterologists to use a UC histologic scoring system/index in routine pathology reporting of colon biopsies?

* Yes, for initial diagnosis
* Yes, for treated cases
* No

End of Block: Demographics and General Information

Start of Block: Knowledge and attitude towards routine use of a histologic score/index in UC

Q10 The primary role of a histologic scoring system/index for Ulcerative Colitis (UC) in routine clinical practice is limited to:

* Initial diagnosis alone
* Monitoring/Assessing disease activity alone
* Both of the above
* Role is not fully established in routine clinical practice
* Do not know

Q11 In patients with endoscopic remission of UC, persistent histologic activity has been associated with higher clinical relapse rate.

* Strongly agree
* Somewhat agree
* Neither agree nor disagree
* Somewhat disagree
* Strongly disagree

Q12 In patients with endoscopic remission of UC, persistent histologic activity has been associated with higher risk of neoplasia.

* Strongly agree
* Somewhat agree
* Neither agree nor disagree
* Somewhat disagree
* Strongly disagree

Q13 Which of the following histologic scoring systems have been most validated for use in assessing activity in UC (multiple options may apply)?

* Geboes score
* Robarts Histopathologic Index
* Modified Riley Score
* Nancy Histopathologic Index
* None of the above

Q14 What is the current minimum requirement for definition of histologic remission in ulcerative colitis using Nancy Histologic Index?

* Less than Grade 1: Absence of readily apparent chronic inflammatory infiltrate
* Less than Grade 2: Complete absence of neutrophils in lamina propria or in epithelium
* Less than Grade 3: Absence of readily apparent neutrophil clusters in the lamina propria and/or in the epithelium
* Do not know

Q15 What is the current minimum requirement for definition of histologic remission in ulcerative colitis using Geboes system?

* Less than or equal to Grade 1.0: No increase in chronic inflammatory infiltrate
* Less than or equal to Grade 2.0: No increase in lamina propria neutrophils and eosinophils
* Less than or equal to Grade 3.0: No neutrophils in epithelium
* Do not know

Q16 What is the current minimum requirement for definition of histologic remission in ulcerative colitis using Robarts Histopathology Index?

* 0: No increase in chronic inflammation, mucosal neutrophils or erosion/ulceration
* Less than 3: No increase mucosal neutrophils
* Less than 5: Less than moderate increase in lamina propria neutrophils
* Do not know

Q17 The following are statements regarding histologic assessment in UC. Please select one of the five options for each statement.\*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly agree (1) | Somewhat agree (2) | Neither agree nor disagree (3) | Somewhat disagree (4) | Strongly disagree (5) |
| Neutrophils are normally present within the lamina propria or epithelium of the colon. |  |  |  |  |  |
| Paneth cells are always abnormal if present in the left colon. |  |  |  |  |  |
| Eosinophils can be used as a marker of histological activity in UC. |  |  |  |  |  |
| Basal plasmacytosis (plasma cells between the bases of the crypts and muscular mucosae) is an important feature that helps distinguish UC from other etiologies such as infectious colitis. |  |  |  |  |  |
| Pyloric or Paneth cell metaplasia are features of chronicity. |  |  |  |  |  |
| Submucosal fibrosis and melanosis coli are features of chronicity. |  |  |  |  |  |

\* Adapted from (PMID: 36687119) Pudipeddi A, Fung C, Christensen B, et al. Knowledge and attitudes towards the use of histological assessments in ulcerative colitis by gastroenterologists vs pathologists. World J Gastroenterol. 2023;29(2):378-389. doi:10.3748/wjg.v29.i2.378

Q18 Are you aware of an artificial intelligence tool that is automated and validated for histologic scoring of UC?

* Yes
* No

Q19 Do you perceive artificial intelligence to be useful in automating a histopatholgoic scoring system to assess disease activity in UC?

* Definitely not
* Probably not
* Might or might not
* Probably yes
* Definitely yes

Q20 Do you think a UC histologic scoring system/index should be incorporated into routine pathology reporting?

* Yes
* No

Display This Question:

If Q20 = Yes

Q21 If yes to Q19, which of the following scoring systems/indices would you prefer to be included in routine reporting?

* Robarts Histopathologic Index
* Nancy Histologic Index
* Geboes Score
* Other (please specify)

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Display This Question:

If Q20 = Yes

Q22 If yes to Q19, what form do you visualize the scoring system/index to be incorporated into routine reporting?

* Final diagnostic line
* Synoptic report
* Diagnostic/microscopic comment
* Other (please specify)

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End of Block: Knowledge and attitude towards routine use of a histologic score/index in UC