



Inflammatory Bowel Disease Among Adults Age 18 and Older: United States, 2023–2024

James M. Dahlhamer, Ph.D., and Emily P. Terlizzi, M.P.H.

At a glance: Inflammatory bowel disease, 2023–2024

What do the data show?

In 2023–2024, 1.6% of adults had ever been diagnosed with any inflammatory bowel disease, including 1.2% who had ever been diagnosed with ulcerative colitis and 0.5% who had ever been diagnosed with Crohn's disease.

Who is most affected?

The prevalence of Crohn's disease, ulcerative colitis, and overall inflammatory bowel disease increased with age. Women were more likely than men to have ulcerative colitis and overall inflammatory bowel disease. White non-Hispanic adults had the highest prevalence of Crohn's disease, ulcerative colitis, and overall inflammatory bowel disease.

Introduction

Crohn's disease (CD) and ulcerative colitis (UC), collectively known as inflammatory bowel disease (IBD), are characterized by chronic inflammation of the gastrointestinal tract (1). People with IBD are more likely than those without IBD to experience ongoing health problems (2), increased health care utilization (3,4), and reduced quality of life (5).

Nationally representative estimates of IBD are limited and based on older data. For example, 1.2% of adults had a diagnosis of IBD based on data from the 2015–2016 National Health Interview Survey (NHIS) (4). Less information is available on CD and UC as unique conditions. A study using 2009–2010 National Health and Nutrition Examination Survey data estimated the prevalence of CD and UC to be 0.3% and 1.0%, respectively (6). This report builds on this



research and presents estimates for U.S. adults age 18 and older with diagnosed CD, UC, or collectively, IBD, using 2023–2024 NHIS data.

Results

In 2023–2024, the percentages of adults with diagnosed CD, UC, and overall IBD were ([Table](#)):

- CD: 0.5% (about 1.3 million adults)
- UC: 1.2% (about 3.1 million adults)
- IBD: 1.6% (about 4.1 million adults)

The percentages of adults with CD, UC, and overall IBD increased with age ([Table](#)):

- CD: 0.3% for adults ages 18–29 to 0.6% for adults age 70 and older
- UC: 0.4% for adults ages 18–29 to 2.2% for adults age 70 and older
- IBD: 0.7% of adults ages 18–29 to 2.7% for adults age 70 and older

Women were more likely than men to have UC and overall IBD ([Table](#)):

- Women: 1.4% had UC and 1.7% had IBD
- Men: 1.0% had UC and 1.4% had IBD

The percentages of adults with CD, UC, and overall IBD differed by race and Hispanic origin ([Table](#)):

- White non-Hispanic (subsequently, White) adults were more likely to have CD (0.6%) than Hispanic (0.2%), Black non-Hispanic (subsequently, Black) (0.3%), and Asian non-Hispanic (subsequently, Asian) (0.3%) adults.
- White adults (1.4%) were more likely to have UC than Hispanic (1.0%), Black (0.7%), and Asian (0.7%) adults.
- White adults (1.9%) were more likely to have IBD than Hispanic (1.2%), Black (0.9%), and Asian (0.9%) adults.

Table. Number and percentage of adults who had ever been diagnosed with Crohn's disease, ulcerative colitis, or any inflammatory bowel disease, by selected characteristics: United States, 2023–2024

Selected characteristic	Crohn's disease		Ulcerative colitis		Overall IBD*	
	Estimated number†	Percent (95% confidence interval)	Estimated number†	Percent (95% confidence interval)	Estimated number†	Percent (95% confidence interval)
Total	1,257,000	0.5 (0.42–0.55)	3,148,000	1.2 (1.12–1.32)	4,108,000	1.6 (1.47–1.71)
Age group§						
18–29	131,000	0.3 (0.15–0.39)	232,000	0.4 (0.30–0.64)	344,000	0.7 (0.48–0.90)
30–39	239,000	0.5 (0.36–0.73)	400,000	0.9 (0.68–1.11)	595,000	1.3 (1.05–1.61)
40–49	178,000	0.4 (0.30–0.60)	421,000	1.0 (0.80–1.31)	514,000	1.3 (1.01–1.55)
50–59	217,000	0.5 (0.40–0.72)	595,000	1.5 (1.21–1.80)	753,000	1.9 (1.58–2.22)
60–69	234,000	0.6 (0.43–0.79)	612,000	1.5 (1.28–1.84)	798,000	2.0 (1.70–2.35)
70 or older	257,000	0.6 (0.50–0.79)	884,000	2.2 (1.90–2.48)	1,100,000	2.7 (2.40–3.04)
Sex						
Men	636,000	0.5 (0.41–0.61)	1,285,000	1.0 (0.89–1.17)¶	1,799,000	1.4 (1.26–1.61)¶
Women	620,000	0.5 (0.39–0.55)	1,862,000	1.4 (1.26–1.56)	2,309,000	1.7 (1.58–1.91)
Race and Hispanic origin						
Non-Hispanic:						
Asian only	45,000	0.3 (0.13–0.52)**	111,000	0.7 (0.42–1.05)**	140,000	0.9 (0.56–1.25)**
Black only	90,000	0.3 (0.17–0.47)**	215,000	0.7 (0.51–0.95)**	287,000	0.9 (0.71–1.21)**
White only	964,000	0.6 (0.52–0.70)	2,296,000	1.4 (1.31–1.58)	3,027,000	1.9 (1.75–2.07)
Hispanic	113,000	0.2 (0.14–0.40)**	447,000	1.0 (0.75–1.25)**	541,000	1.2 (0.92–1.49)**

* Adults were considered to have IBD if they reported ever being diagnosed with either Crohn's disease or ulcerative colitis.
† Estimated number rounded to thousands. Counts for adults of unknown status (responses coded as "refused," "don't know," or "not ascertained") with respect to Crohn's disease, ulcerative colitis, or overall IBD status are not shown separately in the table or included in the calculation of percentages (as part of either denominator or the numerator), to provide a more straightforward presentation of the data. In addition, frequencies presented in the table might be underestimated because of item nonresponse and unknowns.
§ Significant linear trend by age group for Crohn's disease, ulcerative colitis, and overall IBD ($p < 0.05$).
¶ Significantly different from female adults ($p < 0.05$).
** Significantly different from White only, non-Hispanic adults ($p < 0.05$).
NOTES: IBD is inflammatory bowel disease. Estimates are based on household interviews of a sample of the U.S. civilian noninstitutionalized population. All estimates shown meet National Center for Health Statistics presentation standards for proportions. For more information about data presentation standards, visit https://www.cdc.gov/nchs/media/pdfs/2024/09/sr02_175.pdf.
SOURCE: National Center for Health Statistics, National Health Interview Survey, 2023–2024.

Data source and methods

Data are from the 2023–2024 NHIS, a nationally representative household survey of the U.S. civilian noninstitutionalized population (7,8). Adults were asked, "Have you ever been told by a doctor or other health professional that you had Crohn's disease?" and "Have you ever been told by a doctor or other health professional that you had ulcerative colitis?" Adults who responded yes to either question were considered to also have ever been diagnosed with IBD.

Differences between percentages were evaluated using two-sided significance tests at the 0.05 level. Linear trends by age group were evaluated using orthogonal polynomials. All estimates meet the National Center for Health Statistics data presentation standards for proportions (9).

References

1. Hanauer SB. Inflammatory bowel disease: Epidemiology, pathogenesis, and therapeutic opportunities. *Inflamm Bowel Dis*. 2006 Jan;12 Suppl 1:S3–9. DOI: <https://dx.doi.org/10.1097/01.mib.0000195385.19268.68>. PMID: 16378007.
2. Argollo M, Gilardi D, Peyrin-Biroulet C, Chabot JF, Peyrin-Biroulet L, Danese S. Comorbidities in inflammatory bowel disease: A call for action. *Lancet Gastroenterol Hepatol*. 2019 Aug;4(8):643–54. DOI: [https://dx.doi.org/10.1016/S2468-1253\(19\)30173-6](https://dx.doi.org/10.1016/S2468-1253(19)30173-6). Epub 2019 Jun 3. PMID: 31171484.
3. Terlizzi EP, Dahlhamer JM, Xu F, Wheaton AG, Greenlund KJ. Health care utilization among U.S. adults with inflammatory bowel disease, 2015–2016. *Natl Health Stat Report*. 2021 Feb;(152):1–7. DOI: <https://doi.org/10.15620/cdc.100471>. PMID: 33663650.
4. Xu F, Dahlhamer JM, Terlizzi EP, Wheaton AG, Croft JB. Receipt of preventive care services among US adults with inflammatory bowel disease, 2015–2016. *Dig Dis Sci*. 2019 Jul;64(7):1798–1808. DOI: <https://dx.doi.org/10.1007/s10620-019-05494-w>. Epub 2019 Feb 12. PMID: 30746631; PMCID: PMC10477928.
5. Knowles SR, Keefer L, Wilding H, Hewitt C, Graff LA, Mikocka-Walus A. Quality of life in inflammatory bowel disease: A systematic review and meta-analyses-part II. *Inflamm Bowel Dis*. 2018 Apr 23;24(5):966–76. DOI: <https://doi.org/10.1093/ibd/izy015>. PMID: 29688466.
6. Weisman MH, Stens O, Seok Kim H, Hou JK, Miller FW, Dillon CF. Inflammatory bowel disease prevalence: Surveillance data from the U.S. National Health and Nutrition Examination Survey. *Prev Med Rep*. 2023 Mar 9;33:102173. DOI: <https://doi.org/10.1016/j.pmedr.2023.102173>. PMID: 37223580; PMCID: PMC10201824.
7. National Center for Health Statistics. National Health Interview Survey: 2023 survey description document. 2024. Available from: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHIS/2023/srvydes c-508.pdf.
8. National Center for Health Statistics. National Health Interview Survey: 2024 survey description document. 2025. Available from: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHIS/2024/srvydes c-508.pdf.
9. Parker JD, Talih M, Malec DJ, Beresovsky V, Carroll M, Gonzalez JF Jr, et al. National Center for Health Statistics data presentation standards for proportions. *Vital Health Stat 2*. 2017 Aug;(175):1–22. PMID: 30248016.

Suggested citation

Dahlhamer JM, Terlizzi EP. Inflammatory bowel disease among adults age 18 and older: United States, 2023–2024. NCHS Health E-Stat. 2026 Aug;(122):1–5. DOI: <https://dx.doi.org/10.15620/cdc/252463>.

Copyright information

All material appearing in this report is in the public domain and may be reproduced or copied without permission; citation as to source, however, is appreciated.

National Center for Health Statistics

Carolyn M. Greene, M.D., *Acting Director*
Amy M. Branum, Ph.D., *Associate Director for Science*

Division of Health Interview Statistics

Stephen J. Blumberg, Ph.D., *Director*
Anjel Vahratian, Ph.D., *Associate Director for Science*

For email updates on NCHS publication releases, subscribe online:
www.cdc.gov/nchs/updates.

For questions or general information about NCHS:
Tel: 1–800–CDC–INFO (1–800–232–4636) | TTY: 1–888–232–6348
Internet: www.cdc.gov/nchs | Online request form: www.cdc.gov/info

ISSN 1941–4927 Print ed. | ISSN 1941–4935 Online ed.

CS366656