**Title: Inflammatory Bowel Disease Advice Lines: A Scoping Review**

**Background:**

Telephone or email advice lines offer a service that bridges primary and specialist care provision, supporting the needs of those living with an unpredictable disease course. This scoping review aimed to systematically synthesise published evidence with regards to inflammatory bowel disease (IBD) advice line services and to identify gaps in research to inform further work.

**Methods:**

A scoping review was undertaken in accordance with the patterns, advances, gaps, evidence and research (PAGER) framework1. Databases searched included CINAHL, PubMed and EMBASE. Inclusion/exclusion criteria were applied by two reviewers independently. Data were collected using a pre-defined matrix, from which the framework was applied as a means of systematically collating patterns, advances, gaps, evidence and research recommendations.

**Results:**

17 full text publications and 22 abstracts published between 2006 – 2023 were included. Four overarching patterns were identified: advice lines as a complex intervention, drivers for advice line encounters, patient outcomes, and economic impact of advice lines.Advice lines are commonly a nurse-led service, facilitating on-demand specialist advice and clinical care. They function as a complex intervention within growing IBD services, and are currently accessed for a variety of clinical and non-clinical reasons, although flare management and medication advice remain common drivers for access. There are significantly increased costs to wider healthcare, associated with frequent users of IBD advice lines.

**Conclusion:**

The current evidence landscape lacks empirical research supporting the clinical and economic effectiveness of advice lines. IBD advice lines are commonly a nurse-led service functioning as a complex intervention, supporting both administrative and clinical issues. They appear pivotal in preventing use of acute services and escalating or re-directing care including treatment, investigation and advice. Further research should focus on robust clinical and economic evaluation for patients and services, exploring patient experience of advice line services, including barriers and facilitators, and characterising those who do not currently access the service.

**References**

1. Bradbury-Jones C, Aveyard H, Herber OR, Isham L, Taylor J, O’Malley L. Scoping reviews: the PAGER framework for improving the quality of reporting. Int J Soc Res Methodol. 2022;25(4):457-470. doi:10.1080/13645579.2021.1899596