

Mean scores of perceived patient/parent and organisational barriers to successful transition. [1]

Potential barriers	Adult gastroenterologists mean score $\pm$ SD	Paediatric gastroenterologists mean score $\pm$ SD	p-Value
Patients' limited understanding of condition and treatment	4.12 $\pm$ 0.81	3.09 $\pm$ 0.67	0.04
Lack of self advocacy	3.89 $\pm$ 0.87	4.04 $\pm$ 0.84	NS
Parental reluctance to transition	3.57 $\pm$ 1.03	3.63 $\pm$ 0.84	NS
Patients/parent's high expectation	3.59 $\pm$ 0.97	3.68 $\pm$ 0.83	NS
Lack of space/Time	3.93 $\pm$ 1.03	4.22 $\pm$ 0.71	NS
Lack of supportive services (nurses,admin etc.)	3.92 $\pm$ 1.06	4.09 $\pm$ 0.97	NS
Lack of funding	3.59 $\pm$ 1.22	3.77 $\pm$ 1.19	NS
Clinicians lack of trust in relevant clinical services	3.12 $\pm$ 0.64	4.19 $\pm$ 0.51	0.01
Lack of interest in relevant colleagues	3.08 $\pm$ 1.24	3.90 $\pm$ 1.15	0.02
Lack of defined policies	3.32 $\pm$ 1.07	3.40 $\pm$ 1.09	NS

Scores: 1 = Not important, 2 = don't know 3 = minimally important, 4 = moderately important, 5 = very important.

Mean scores of perceived importance of competencies at transfer. [1]

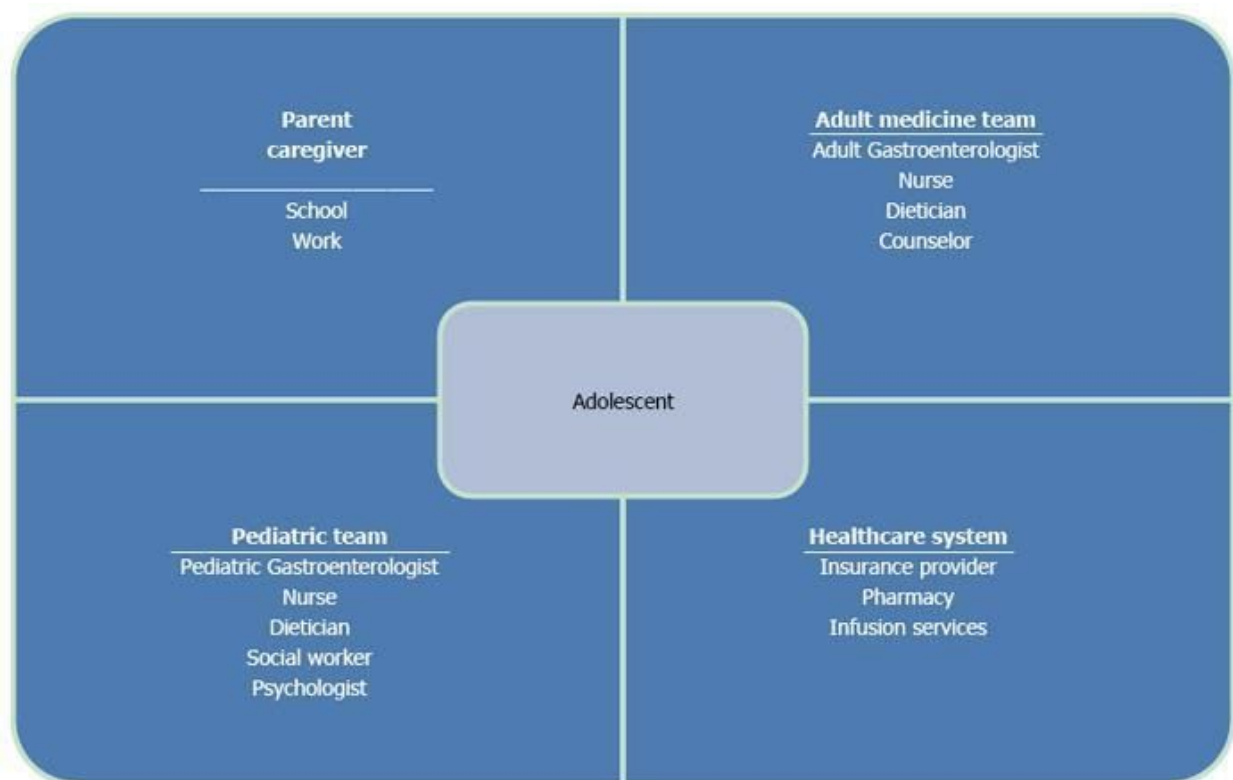
Competency	Adult gastroenterologists mean score $\pm$ SD	Paediatric gastroenterologists mean score $\pm$ SD	p-Value
Understanding of disease	4.19 $\pm$ 0.87	4.33 $\pm$ 0.68	NS
Understanding of treatment	4.22 $\pm$ 0.86	4.47 $\pm$ 0.64	NS
Ability to take medicines independently	3.97 $\pm$ 0.93	4.23 $\pm$ 0.85	NS
Understanding of impact of smoking on the disease	3.76 $\pm$ 1.03	3.57 $\pm$ 0.78	NS
Ability to attend clinics without parents	3.20 $\pm$ 1.03	3.96 $\pm$ 1.16	0.02
Ability to undergo endoscopies without anaesthetic	3.95 $\pm$ 1.13	3.04 $\pm$ 1.22	0.01
understanding of impact of diet on the disease	3.02 $\pm$ 0.93	3.09 $\pm$ 0.97	NS
Membership of patient group	2.34 $\pm$ 1.05	2.09 $\pm$ 0.99	NS

Scores: 1 = Not important, 2 = minimal importance, 3 = of moderate importance, 4 = very important but not essential, 5 = very important and essential

#### Top 5 ranked obstacles in practice: [1]

- Lack of funding
- Lack of time
- Lack of support services
- Too few patients
- Lack of training

[1] The requirements and barriers to successful transition of adolescents with inflammatory bowel disease: differing perceptions from a survey of adult and paediatric gastroenterologists. Sebastian S<sup>1</sup>, Jenkins H et al. *J Crohns Colitis*. 2012 Sep;6(8):830-44. doi: 10.1016/j.crohns.2012.01.010. Epub 2012 Feb 24.



**Figure 1 Transition of care involves multiple stakeholders invested. [2]**

[2] Afzali A, Wahbeh G. Transition of pediatric to adult care in inflammatory bowel disease: Is it as easy as 1, 2, 3? *World J Gastroenterol* 2017; 23(20): 3624-3631

Based on these references above, following article is written

