Among other rare LOF, we identified a case of CHD7 discussed in literature in gastro-related context and a case of CFTR duodenal stenosis pathogenic variant. The CFTR variant has been seen in pancreatitis and is likely causative of Cystic Fibrosis Gut which is characterized by increased mucus viscosity and development of intestinal inflammation, dysbiosis, and dysmotility.

**CONCLUSION:** Whole genome sequencing of gastroparesis patient samples showed enrichment for rare variants in the MTLR in cases compared with controls. The identified LOF variants within the region can serve as a risk factor for disease as well as inform treatments, especially given the knowledge of different response to treatment.

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**Evaluation of Somatic Pain Distribution Using Body Maps for Patients With Chronic Abdominal Pain Syndromes**

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**INTRODUCTION:** Chronic abdominal pain (CAP) is a widespread condition with a large impact on the healthcare field. Understanding the characteristics of patients with CAP and identifying high risk patients remains an important issue, particularly in the opioid epidemic era. A body map is a validated tool shown to accurately depict pain locations across the body. Our aim was to use body map data to characterize the pain distribution patterns of patients referred for abdominal pain to the Stanford Pain Clinic and to assess whether patterns of pain distribution (e.g. localized abdominal pain vs. widespread pain) are associated with underlying diagnoses and differences in psychosocial functioning.

**METHODS:** We evaluated patients with CAP who presented to the Stanford Pain Clinic between 2013-2018. Data was collected through the CHOIR registry - a platform that longitudinally collects codes, and psychosocial functioning with NIH PROMIS questionnaires. Analysis was performed using descriptive statistics, one-way ANOVA for the PROMIS scores, and the Kruskall-Wallis test for comparing measures across the 3 groups.

**RESULTS:** A total of 258 patients with abdominal pain were identified through the CHOIR registry. The majority of the patients were female (91%) and had widespread pain patterns (61%). Patients with widespread pain patterns reported higher pain interference (P < 0.01), anxiety (P < 0.05), and sleep disturbances (P < 0.01) compared to the intermediate pain group. Patients with widespread pain were more likely to carry a diagnosis of 2 or more chronic overlapping pain conditions (P < 0.001). Opioid use remained high in all patients, regardless of somatic distribution pattern.

**CONCLUSION:** Our study supports that a body map is an effective and quick screening tool to help characterize CAP patients and identify higher risk patients. Identifying patients with widespread pain patterns early may help guide therapeutic interventions towards factors more prominent in this group such as pain interference, anxiety and sleep disturbance. Patients with widespread pain patterns are more likely to also suffer from chronic overlapping pain syndromes and should be screened for these conditions.

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**Social Media Use in Irritable Bowel Syndrome Patient Education: A Content Analysis of YouTube Videos**

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**INTRODUCTION:** Irritable bowel syndrome (IBS) affects around 11% of the population globally and often associated with lower quality of life. The diagnostic challenges and myths surrounding IBS