

RISANKIZUMAB IN PERIANAL CROHN'S DISEASE: REAL-WORLD EVIDENCE FROM A MULTICENTER RETROSPECTIVE COHORT

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A retrospective multicenter study of 214 patients with perianal Crohn's disease found that risankizumab achieved 58% clinical remission in active disease and 2% relapse in inactive disease, comparing favorably to anti-TNF, ustekinumab, and vedolizumab.

KEY POINTS

- In active perianal Crohn's disease, risankizumab achieved clinical remission in 58% of patients compared to 32.9% with non-risankizumab biologics ($p = 0.01$), including 27% for anti-TNF, 44% for ustekinumab, and 25% for vedolizumab.
- Median time to clinical response with risankizumab was 3 months, comparable to anti-TNF (3 months, $p = 0.4$) but significantly faster than ustekinumab (5 months, $p < 0.001$) and vedolizumab (6.5 months, $p < 0.001$).
- Among patients with inactive disease at baseline, propensity-matched analysis showed risankizumab had significantly lower relapse rates versus anti-TNF (2% vs. 22%, $p = 0.004$) and vedolizumab (0% vs. 28%, $p = 0.004$).
- The study was retrospective and included patients receiving risankizumab as second-line or later therapy between 2020 and 2024, with comparisons to propensity-matched historical controls; the authors note that prospective validation is warranted.

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