

EFFECT OF 104 WEEKS OF MIRIKIZUMAB TREATMENT ON INFLAMMATORY BOWEL DISEASE QUESTIONNAIRE SCORES AMONG PATIENTS WITH MODERATELY TO SEVERELY ACTIVE CROHN'S DISEASE

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Mirikizumab treatment maintained health-related quality of life improvements through two years in patients with moderately-to-severely active Crohn's disease who achieved endoscopic improvement after induction therapy.

KEY POINTS

- In the Phase 2 Serenity study, 68.5% (87/127) of patients receiving mirikizumab induction achieved endoscopic improvement at Week 12 and were rerandomized to intravenous continuation or subcutaneous maintenance therapy.
- At Week 52, IBDQ response rates were 75.6% (IV continuation) and 80.4% (subcutaneous), with remission rates of 65.9% and 67.4%, respectively, among Week 12 endoscopic improvers.
- At Week 104, IBDQ response rates were 81.8% (IV continuation) and 78.0% (subcutaneous), with remission rates of 69.7% and 56.1%, respectively.
- Mean IBDQ score changes from baseline remained consistent between Week 52 and Week 104 across all treatment groups, with total scores and domain scores (bowel symptoms, systemic symptoms, emotional function, social function) remaining similar at both timepoints.
- This analysis may be of interest to gastroenterologists managing patients with moderately-to-severely active Crohn's disease considering long-term treatment with anti-IL23p19 antibodies.

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