

TREAT-TO-TARGET APPROACH FOR ENDOSCOPIC OUTCOMES: INVESTIGATING AND COMPARING TREATMENTS IN ULCERATIVE COLITIS. THE TACTIC-UC STUDY – AN INTERIM ANALYSIS

Alessandro Armuzzi

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In a retrospective study of 178 ulcerative colitis patients managed with endoscopy-driven treat-to-target dose optimization, anti-TNF therapy achieved superior mucosal healing and endoscopic remission rates at one year compared to vedolizumab and ustekinumab.

KEY POINTS

- Anti-TNF therapy achieved mucosal healing in 41% of patients at one year, compared to 11% with vedolizumab and 23% with ustekinumab, with pairwise comparisons showing anti-TNF superiority over both agents.
- Endoscopic remission rates at one year were 13% for anti-TNF, 3% for vedolizumab, and 9% for ustekinumab, with anti-TNF superior to vedolizumab.
- Difficult-to-treat disease, extensive colitis (E3), elevated CRP, and elevated fecal calprotectin were independently associated with reduced probability of achieving mucosal healing and endoscopic remission.
- Adverse events were infrequent and mild across all treatment groups, with no serious adverse events reported and comparable safety profiles.
- This real-world evidence may inform treatment sequencing decisions for gastroenterologists managing ulcerative colitis patients with moderate to severe endoscopic activity despite quiescent or mild clinical symptoms.

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