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Summary

TREATMENT DISCONTINUATION DUE TO LACK OF EFFICACY DURING MAINTENANCE TREATMENT WITH INFLIXIMAB OR VEDOLIZUMAB IN PATIENTS WITH CROHN'S DISEASE: A COMPARATIVE ANALYSIS OF RANDOMIZED CONTROLLED TRIALS

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Meta-analysis of randomized controlled trials shows infliximab had significantly lower discontinuation rates due to lack of efficacy (5%) compared to vedolizumab (37%) during one-year maintenance therapy in Crohn's disease patients.

KEY POINTS

- The analysis included four RCTs on infliximab (N=659) and two RCTs on vedolizumab (N=995), adding results from the LIBERTY-CD phase 3 trial to a previous meta-analysis.
- Pooled discontinuation rates due to lack of efficacy during one-year maintenance were 0.05 for infliximab (95% CI: 0.00–0.09) versus 0.37 for vedolizumab (95% CI: 0.26–0.48).
- A sensitivity analysis excluding non-responders to induction therapy showed a slightly lower vedolizumab discontinuation rate of 0.32 (95% CI: 0.27–0.37), but the significant difference between treatments was maintained.
- High heterogeneity was observed in both treatment groups, with I^2 values of 86% for infliximab and 93% for vedolizumab in the primary analysis.

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