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Summary

COMBINATION THERAPY WITH BIOLOGICS AND SMALL MOLECULES IN REFRACTORY INFLAMMATORY BOWEL DISEASE (IBD): A SINGLE TERTIARY-CENTRE EXPERIENCE

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IBD

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A retrospective single-centre study of 13 adult patients with refractory Crohn's disease treated with combination therapy (two biologics or one biologic plus a small molecule) found that 69 percent responded and 54 percent achieved steroid-free response.

KEY POINTS

- The study evaluated 13 patients with Crohn's disease who received combination therapy for refractory disease, with combinations including vedolizumab and adalimumab, ustekinumab and adalimumab, upadacitinib with infliximab or vedolizumab, and others.
- Response to combination therapy was observed in 9 of 13 patients (69 percent), with steroid-free response in 7 patients (54 percent); median duration of combination therapy was 182 days.
- Three patients (23 percent) experienced worsening of their IBD and all had complex, multi-focal Crohn's disease; one patient (8 percent) developed an adverse event (hospitalisation, mild nosocomial COVID-19 infection, and required surgery), though this patient was also receiving steroids and had received methotrexate.
- Combination therapy is currently being continued in 10 of 13 patients (77 percent); the authors conclude that combination therapy may be a successful approach for refractory IBD in high-risk phenotypes, though additional studies are needed.
- This material is most relevant for gastroenterologists managing patients with medically refractory Crohn's disease.

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