Predicting outcomes based on B-cell profiles

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UEG Week Barcelona 2026 | Presentation

Immunology | Mechanisms & Personalised Medicine | IBD

October 19, 2026

Massively parallel antibody profiling using PhIP-Seq identified over 300 previously unreported antigen reactivities in IBD, with distinct pre-diagnostic trajectories suggesting potential for early risk stratification before irreversible intestinal damage occurs.

KEY POINTS

- The speaker profiled antibody responses against 357,000 peptide antigens in nearly 500 IBD patients and 1,400 controls, reporting anti-flagellin responses particularly prominent in Crohn's disease and antiviral responses in ulcerative colitis, with discrimination of Crohn's disease from controls at area under the curve nearly 0.9.
- In longitudinal pre-diagnostic cohorts, the speaker reported that antibody responses to CMV and EBV peptides increased toward diagnosis with trajectories differing from controls, and anti-flagellin responses increased across the transition to clinical diagnosis.
- The speaker stated that in Crohn's disease, Staphylococcus and Haemophilus directed responses associated with lower risk of disease progression over median 10-year follow-up, while herpes simplex virus type one responses were more frequent in patients developing post-operative recurrence after ileocecal resection.
- In primary sclerosing cholangitis, the speaker reported that selected CMV and EBV directed responses associated with lower survival for liver transplantation or all-cause mortality in over 1,400 profiled individuals.
- The speaker stated these antibody profiles could support risk stratification and selection for prevention studies, requiring prospective validation currently ongoing in the Intercept consortium, and that functional studies are needed before antigen-specific immunomodulation can be considered therapeutically.

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