

TOFACITINIB VERSUS MONOCLONAL ANTIBODIES IN ULCERATIVE COLITIS: PROPENSITY SCORE MATCHED REAL WORLD EFFECTIVENESS DATA FROM THE PERSISTENCE AUSTRALIAN NATIONAL IBD COHORT (PANIC5)

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Poster

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In a population-based Australian registry of 9,671 ulcerative colitis patients, tofacitinib demonstrated superior treatment persistence compared to all monoclonal antibodies in advanced-therapy-exposed patients, while vedolizumab ranked highest in therapy-naïve patients.

KEY POINTS

- Among 14,772 treatment lines tracked through December 2021, tofacitinib showed significantly higher persistence than infliximab, adalimumab, and golimumab in advanced-therapy-exposed ulcerative colitis patients (all $P < 0.001$), ranking first in this group.
- In advanced-therapy-naïve patients, no significant persistence differences emerged between tofacitinib and monoclonal antibodies after propensity score matching (all $P > 0.05$), with vedolizumab ranking highest.
- Unlike monoclonal antibodies, tofacitinib persistence did not decline when moving from therapy-naïve to therapy-exposed status ($P = 0.77$), whereas vedolizumab declined by 19 months and TNF inhibitors by 8 months (both $P < 0.001$).
- Independent predictors of higher persistence included tofacitinib use, advanced-therapy-naïve status, and immunomodulator co-therapy; age and sex were not significant predictors.
- This registry analysis provides the first population-based persistence rankings for ulcerative colitis advanced therapies in both therapy-naïve and therapy-exposed settings using Australian national prescribing data.

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