

How to boost your biology? Every day strategies to improve therapies and combinations

Britta Siegmund

UEG Week Berlin 2025

Presentation

IBD

Mechanisms & Personalised Medicine

Surgery

October 7, 2025

The speaker outlined five strategies to optimize treatment outcomes in difficult-to-treat IBD patients, emphasizing early combination therapy, monitoring for loss of response, nutritional support, and distinguishing inflammatory from fibrotic disease.

KEY POINTS

- The speaker stated that the Profile study showed 80% of patients achieved steroid and surgery-free remission at week 48 with immediate combination therapy (infliximab and thiopurine) versus step-up approach, with better first flare-free survival over one year
- In patients with terminal ileitis and obstructive symptoms, the speaker emphasized distinguishing inflammation from fibrosis to avoid using expensive medical therapy when surgery is more appropriate
- The speaker reported UK study data showing 40% of patients on combination therapy without a specific gene locus developed anti-drug antibodies versus 60% who did not, with higher rates on monotherapy
- A study presented this year showed tasty and healthy diet (excluding processed food, gluten, red meat, and dairy except plain yogurt) had higher tolerability and clinical remission than exclusive enteral nutrition in mild-to-moderate Crohn's disease over 8 weeks
- The speaker stated the Vigour trial demonstrated superiority of dual biologic therapy (golimumab plus guselkumab) versus monotherapy in the first 12 weeks, with prominent effect in the first 3-4 months, suggesting future potential for aggressive induction followed by monotherapy maintenance
- The speaker described an immune escape mechanism where T cells express IL-23 receptor when anti-TNF blocks TNF signaling, suggesting IL-23 inhibitors as a good choice for anti-TNF non-responders without antibodies

VIEW THIS CONTENT ON GUTFLIX

<https://gutflix.eu/search/d/dfa34ffa-a82e-11f0-9762-0242ac140006>



AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.