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Summary

EFFECTS OF EARLY MUCOSAL HEALING AT WEEK 10 USING STRINGENT CRITERIA IN PATIENTS WITH ULCERATIVE COLITIS TREATED WITH OZANIMOD ON CLINICAL OUTCOMES AT WEEK 52

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In a post hoc analysis of the True North trial, 5.7% of ozanimod-treated ulcerative colitis patients achieving clinical response at Week 10 met stringent mucosal healing criteria (endoscopy subscore 0 plus histologic remission), and these patients showed numerically higher rates of clinical remission, corticosteroid-free remission, and mucosal healing at Week 52 compared to those without stringent early healing.

KEY POINTS

- Of 230 ozanimod-treated patients with clinical response at Week 10, 13 patients (5.7%) achieved stringent mucosal healing (endoscopy subscore = 0 plus Geboes score <2.0) while 44 patients (19.1%) met standard mucosal healing criteria (endoscopy subscore ≤1 plus histologic remission).
- At Week 52, patients with stringent mucosal healing at Week 10 had higher rates of clinical remission (53.8% vs 35.9%), corticosteroid-free remission (53.8% vs 30.4%), mucosal healing (61.5% vs 27.6%), and histologic remission (61.5% vs 31.8%) compared to those without stringent early healing.
- Patients with stringent mucosal healing at Week 10 demonstrated numerically better Week 52 outcomes compared to those with standard mucosal healing, except for endoscopic improvement where rates were similar (61.5% vs 63.6%).
- Baseline characteristics differed between groups: all patients with stringent mucosal healing had moderate disease severity and left-sided disease was more common, while corticosteroid use and prior TNF inhibitor exposure were lower in this group.

– This analysis may interest clinicians managing ulcerative colitis patients on ozanimod who are evaluating early treatment response as a predictor of longer-term outcomes.

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