SAFETY ASSESSMENT OF ORODISPERSABLE BUDESONIDE ON THE HYPOTHALAMIC-PITUITARY-ADRENAL AXIS AND ON MARKERS OF RESORPTION AND BONE FORMATION IN PATIENTS WITH EOSINOPHILIC ESOPHAGITIS

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A prospective study of 20 adults with eosinophilic esophagitis treated with orodispersable budesonide 1 mg twice daily for 14 weeks found no statistically significant effect on adrenal function but observed a statistically significant decrease in serum osteocalcin.

KEY POINTS

- Twenty patients with EoE who had not responded to proton pump inhibitors and had no prior corticosteroid treatment received orodispersable budesonide (Jorveza) 1 mg twice daily for 14 weeks.
- ACTH stimulation test results showed no statistically significant differences in cortisol response before versus after treatment (cortisol 60 minutes post-Synacthen: 22.93 +/- 2.37 versus 20.63 +/- 2.42, p-value 0.183), with only 3 patients showing borderline-low values considered variants of normality.
- Serum osteocalcin decreased significantly from 32.16 +/- 16.91 ng/mL at baseline to 24.18 +/- 9.76 ng/mL at week 14 (p-value 0.006), while other bone resorption markers remained unchanged.
- The authors conclude that patients treated with orodispersable budesonide at this dose have no risk of acute or chronic adrenal insufficiency and suggest the osteocalcin decrease may indicate some systemic corticosteroid absorption requiring further study.
- This is described as the first study in adults specifically designed to examine effects of this treatment on the hypothalamic-pituitary-adrenal axis and bone resorption in EoE.

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