

INFLAMMATORY BIOMARKER REDUCTIONS AND IMPROVEMENTS IN CLINICAL AND QUALITY OF LIFE OUTCOMES WITH RISANKIZUMAB THROUGH 100 WEEKS OF TREATMENT IN PATIENTS WITH MODERATELY TO SEVERELY ACTIVE CROHN'S DISEASE: A POST HOC ANALYSIS FROM PART 2 OF THE SEQUENCE TR

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Poster

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Post hoc analysis of the SEQUENCE open-label extension showed that risankizumab treatment in moderately to severely active Crohn's disease led to inflammatory biomarker normalisation in the majority of patients through week 100, with most simultaneously achieving clinical or quality of life remission.

KEY POINTS

- Among 184 patients with elevated hs-CRP or fecal calprotectin at baseline, 77.7% achieved biomarker normalisation at week 52, increasing to 86.6% at week 100 (as observed data)
- At week 100, 71.0% of patients achieved both normalised biomarkers and CDAI clinical remission, 62.9% achieved biomarkers plus SF/APS clinical remission, and 57.1% achieved biomarkers plus IBDQ remission (as observed data)
- Patients received risankizumab 360mg subcutaneously every 8 weeks after completing week 48 of the parent trial
- This post hoc analysis of the SEQUENCE OLE (NCT04524611) included patients treated through week 100 with data cutoff July 11, 2024
- The study was funded by AbbVie and may be relevant to clinicians managing moderately to severely active Crohn's disease and seeking data on combined treatment targets

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