gutflix
GI learning, personalised

Summary

USTEKINUMAB IS SUPERIOR IN TREATMENT PERSISTENCE AND COLECTOMY-FREE SURVIVAL AMONG SEQUENTIAL BIOLOGICAL THERAPIES IN MODERATE-TO-SEVERE ULCERATIVE COLITIS REFRACTORY TO ANTI-TNF – PRELIMINARY DATA OF A RETROSPECTIVE, MULTICENTRE STUDY

Davide Giuseppe Ribaldone

UEG Week Copenhagen 2023 | Poster

IBD

October 15, 2023

In a retrospective multicentre study of 454 ulcerative colitis patients who failed anti-TNF therapy, ustekinumab demonstrated superior treatment persistence and lower colectomy rates compared to vedolizumab and tofacitinib as second-line therapy.

KEY POINTS

- Ustekinumab showed significantly superior treatment persistence compared to vedolizumab and tofacitinib at 3, 6, 12, and 24 months following anti-TNF failure, regardless of the number of previous anti-TNF agents used.
- Colectomy incidence was significantly lower with second-line ustekinumab (5.8%) compared to vedolizumab (16.8%) or tofacitinib (20.4%), with overall colectomy-free survival of 97.2% at 1 year and 91.2% at 3 years.
- Primary non-response as a reason for treatment discontinuation progressively increased with sequential treatment lines (23.1% to 45.0%), while loss of response rates showed no definite trend across lines.
- Pancolitis was predictive of colectomy (OR 3.24, p=0.0012), while cyclosporine use during the disease course was protective against colectomy (OR 2.88, p=0.0026).
- This ongoing cohort study with median follow-up of 57.7 months will interest gastroenterologists managing moderate-to-severe ulcerative colitis patients requiring sequential biologic therapies.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/e331bfb2-743c-11ee-b138-0242ac140004

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.