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Summary

ASSESSING THE EVOLVING NUANCES OF JAK INHIBITOR PRESCRIPTION IN ULCERATIVE COLITIS (UC) PATIENTS

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A multi-centre European chart review of ulcerative colitis patients receiving JAK inhibitors from 2019 to 2022 shows evolving treatment patterns, with increasing use in younger patients with higher disease activity and a shift from monotherapy to combination with 5-ASA.

KEY POINTS

- Gastroenterologists across five European countries reported treating progressively younger UC patients with JAK inhibitors over the three-year period, with mean age decreasing from 40 years in 2019 to 36 years in 2022, and a higher proportion of patients without comorbidities (39% in 2019 to 65% in 2022).
- Mean calprotectin levels in JAK inhibitor-treated patients increased from 204 in 2019 to 341 in 2022, suggesting use in patients with higher disease activity.
- Rapid symptomatic control and pain reduction were the most frequently cited reasons for choosing JAK inhibitors at all time points, with rapid symptomatic control cited in 36% of patients in 2022 versus 22% in 2019.
- JAK inhibitor monotherapy usage decreased from 76% in 2019 to 55% in 2022, while combination therapy with 5-ASA increased from 8% to 30% over the same period.
- This material would be most relevant for gastroenterologists interested in real-world JAK inhibitor prescribing trends in ulcerative colitis across Europe.

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