

CORRELATION BETWEEN SERUM ANTI-TNF TROUGH CONCENTRATIONS AND TRANSMURAL DAMAGE IN CROHN'S DISEASE PATIENTS IN LONG STANDING AND STABLE CLINICAL REMISSION

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In a prospective study of 68 Crohn's disease patients in clinical remission on anti-TNF therapy for at least one year, transmural healing was achieved in 38.4% while 38.2% showed no transmural response despite stable clinical remission.

KEY POINTS

- Among patients in clinical remission, 52.9% had anti-TNF trough levels below the therapeutic threshold, and persistence of increased bowel wall thickness was associated with sub-therapeutic drug levels in multivariate analysis.
- Transmural healing correlated independently with higher BMI and lower baseline bowel wall thickness, while no response correlated with lower BMI, higher baseline bowel wall thickness, lower drug levels, and stricturing phenotype.
- Transmural response was independently associated with shorter disease duration, higher anti-TNF drug levels, and non-stricturing phenotype.
- This material may be most relevant to gastroenterologists managing Crohn's disease patients on anti-TNF therapy and considering therapeutic drug monitoring and intestinal ultrasound for treatment optimization.

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