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Summary

# SEQUENCING JAK-INHIBITORS IN ULCERATIVE COLITIS: EFFECTIVENESS AND SAFETY OF SWITCHING WITHIN TREATMENT CLASS

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**A multicentre retrospective study of 243 patients with ulcerative colitis found that switching to a second JAK-inhibitor after prior JAK-inhibitor exposure achieved steroid-free clinical remission in 48% at week 12, with higher baseline disease activity and steroid use predicting lower success.**

## KEY POINTS

- Steroid-free clinical remission at week 12 was achieved in 48% of patients, declining to 49% at week 26 and 28% at week 52.
- The majority of patients (87%) received upadacitinib as the second JAK-inhibitor, most commonly after tofacitinib (68%) or filgotinib (19%).
- Higher baseline clinical disease activity and concomitant steroid use at initiation were independently associated with reduced likelihood of week 12 steroid-free clinical remission in multivariate analysis.
- Endoscopic remission was observed in 22% at early timepoint and 34% at late timepoint, with treatment retention of 91% at week 12 and 79% at week 52.
- Adverse events occurred in 23% of patients, predominantly acne and upper respiratory tract infections, with no major cardiovascular or venous thromboembolic events reported.

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