

COMPARATIVE EFFICACY AND SAFETY OF DIFFERENT PHARMACOLOGICAL INTERVENTIONS FOR EOSINOPHILIC ESOPHAGITIS: A NETWORK META-ANALYSIS

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Poster

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A network meta-analysis of eight randomized controlled trials (1057 adult patients) found that monoclonal antibodies and swallowed topical corticosteroids were the most effective treatments for eosinophilic esophagitis based on histologic remission, both with relatively low rates of serious adverse events.

KEY POINTS

- All three active interventions (swallowed topical corticosteroids, monoclonal antibodies, and proton pump inhibitors) were significantly superior to placebo for achieving histologic remission in eosinophilic esophagitis.
- Head-to-head comparisons showed no significant differences in histologic remission between swallowed topical corticosteroids, monoclonal antibodies, and proton pump inhibitors.
- Swallowed topical corticosteroids ranked highest for efficacy (SUCRA 0.93), followed by monoclonal antibodies (SUCRA 0.78) and proton pump inhibitors (SUCRA 0.38).
- Neither monoclonal antibodies nor swallowed topical corticosteroids resulted in a significant increase in serious adverse event rates compared with placebo.
- This analysis is relevant for gastroenterologists and clinicians managing adult patients with eosinophilic esophagitis who need to select among available pharmacological treatment options.

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