A HIGHER TH2/TREG RATIO MAY BE A MARKER OF REFRACTORY ULCERATIVE COLITIS WITH LONGER DISEASE DURATION AND FREQUENT USE OF STEROIDS AND/OR IMMUNOSUPPRESSANTS, WHEREAS HLA GENOTYPE IS NOT

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A study of 62 ulcerative colitis patients found that higher Th2/Treg cytokine ratios were associated with longer disease duration and more frequent steroid use, and specific HLA genotypes correlated with lower Th2/Treg ratios.

KEY POINTS

- Compared to Crohn's disease and healthy controls, ulcerative colitis patients showed significantly higher Th2 and lower Treg cell profiles ($p<0.05$).
- Patients with Th2/Treg ratio above 1.0 had significantly longer disease duration (18.91 vs 12.58 years, $p=0.04$) and trended toward more frequent steroid or immunosuppressant use (66.7% vs 48.5%, $p=0.26$).
- Specific HLA alleles (DRB1*15:02:01, DQB1*06:01:01, DPB1*09:01) were associated with lower Th2/Treg ratios with statistical significance for DQB1*06:01:01 ($p=0.02$).
- The authors conclude that cytokine assessment may help identify ulcerative colitis patient subgroups who could benefit from Th2-modulating therapies, though other factors such as intestinal microbiota must also be considered.
- This material is relevant for gastroenterologists and researchers interested in personalized treatment strategies for ulcerative colitis based on immunological profiling.

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