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Summary

COMPARATIVE EFFICACY AND SAFETY OF UPADACITINIB, VEDOLIZUMAB, USTEKINUMAB AND TOFACITINIB AFTER ONE-YEAR MAINTENANCE THERAPY FOR MODERATELY TO SEVERELY ACTIVE ULCERATIVE COLITIS: 3 MATCHING-ADJUSTED INDIRECT COMPARISONS

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Matching-adjusted indirect comparisons of maintenance therapy in ulcerative colitis found upadacitinib demonstrated greater clinical efficacy than vedolizumab, ustekinumab, and tofacitinib at one year, with similar safety profiles across all agents.

KEY POINTS

- Upadacitinib 30 mg once daily showed statistically significant superiority over vedolizumab, ustekinumab, and tofacitinib for clinical response, clinical remission, and endoscopic improvement, with numbers needed to treat below 8.7.
- Upadacitinib 15 mg once daily demonstrated significantly greater clinical response, clinical remission, and endoscopic improvement versus vedolizumab, and greater clinical response and endoscopic improvement versus tofacitinib.
- Safety outcomes including adverse events, serious adverse events, and adverse events leading to discontinuation showed small, non-significant differences between upadacitinib and comparator therapies.
- The analysis used placebo-anchored matching-adjusted indirect comparisons adjusting for baseline characteristics including age, gender, disease extent and duration, Mayo score, and prior medication use across phase 3 maintenance trials.
- Study limitations include differences in trial design such as variable rerandomization timing, dosing schedules, assessment timepoints, and endpoint definitions that may affect responder profiles; the study was funded by AbbVie with several author employees.

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