

ACHIEVEMENT OF STRINGENT EFFICACY ENDPOINTS IN PATIENTS WITH MODERATELY TO SEVERELY ACTIVE CROHN'S DISEASE TREATED WITH UPADACITINIB

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UEG Week Copenhagen 2023

Poster

IBD

October 15, 2023

Upadacitinib demonstrated significantly higher achievement of stringent composite clinical and endoscopic endpoints compared with placebo in both induction and maintenance therapy for moderately to severely active Crohn's disease across five efficacy measures.

KEY POINTS

- At week 12 induction, significantly more patients receiving upadacitinib 45 mg versus placebo achieved all five composite endpoints, with the largest difference observed for enhanced clinical response and endoscopic response (33.7% versus 6.1%, nominal $P \leq .001$).
- At week 52 maintenance, both upadacitinib 30 mg and 15 mg demonstrated significantly greater achievement of all stringent endpoints versus placebo, with upadacitinib 30 mg showing numerically higher rates than 15 mg across all measures.
- Composite endpoints assessed included enhanced clinical response and endoscopic response, CR-100 and endoscopic response, CDAI clinical remission and endoscopic response, SF/APS clinical remission and endoscopic remission, and CDAI clinical remission and endoscopic remission.
- Data derived from three phase 3 randomized controlled trials (U-EXCEL, U-EXCEED, U-ENDURE) using nonresponder imputation with multiple imputation for COVID-19-related missing data; P values were nominal and not multiplicity adjusted.

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