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Summary

BUDESONIDE INDUCES FAVOURABLE HISTOLOGIC AND SYMPTOMATIC RECOVERY IN PATIENTS WITH NON-RESPONSIVE AND REFRACTORY COELIAC DISEASE WHEN GIVEN IN AN OPEN CAPSULE FORMAT

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In a retrospective cohort of 47 patients with non-responsive or refractory coeliac disease, open capsule budesonide 3mg three times daily was associated with significantly greater mucosal healing and symptom improvement compared to closed capsule budesonide 9mg once daily.

KEY POINTS

- Open capsule budesonide achieved complete mucosal healing in 52% of patients versus 6% with closed capsule format, and partial healing in 29% versus 25%, with statistically significant differences ($p<0.001$).
- Complete symptom improvement occurred in 47% of open capsule patients versus 14% with closed capsules, and partial improvement in 42% versus 21% ($p=0.003$).
- The study included 47 patients (11 NRCD, 30 RCD1, 6 RCD2) on strict gluten-free diet for mean 4.6 to 12 years; all had dietitian-confirmed adherence and received budesonide for 3-4 months.
- Side-effects were reported in 21% of patients and included hyperglycaemia, weight gain, insomnia, tremor, dizziness, bruising and oesophageal candidiasis, generally mild in severity.
- This retrospective study was funded by Tillots Pharma and the authors note prospective studies are warranted to confirm efficacy and long-term safety.

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