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Summary

EVOLVING MANAGEMENT STRATEGIES IN GASTROINTESTINAL IMMUNOTHERAPY RELATED ADVERSE EVENTS

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A single-centre retrospective study of 99 patients receiving combination nivolumab and ipilimumab found 26% developed gastrointestinal immune-related adverse effects, with management practices varying substantially from published guidelines.

KEY POINTS

- Among 99 patients on combination immunotherapy, 15% developed diarrhoea and 11% developed hepatitis.
- Of 5 patients with Grade 3-4 diarrhoea, 3 (60%) required escalation to infliximab, yet all had only mild colitis on colonoscopy.
- Only 57% of patients with Grade 3-4 hepatitis received high-dose intravenous steroids as recommended by current guidelines, with only one requiring steroid-sparing agents.
- Only 50% of all gastrointestinal immune-related adverse effect cases involved a gastroenterologist.
- The authors suggest symptom severity may better predict need for escalation than endoscopic findings for diarrhoea, and that less aggressive steroid therapy may suffice for hepatitis, though further prospective studies are needed.

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