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Summary

COMBINATION OF GRANULOCYTE–MONOCYTE APHERESIS AND TOFACITINIB: MULTICENTRE AND RETROSPECTIVE STUDY

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A retrospective multicentre study of 12 patients with ulcerative colitis found that combining granulocyte-monocyte apheresis with tofacitinib after primary non-response or loss of response was associated with clinical improvement and no adverse events.

KEY POINTS

- Partial Mayo score significantly decreased one month after the last GMA session (p=0.027) in patients who had not responded to tofacitinib alone.
- All patients receiving steroids at baseline were able to discontinue them, and no patient required colectomy during follow-up.
- Patients received a median of 11 GMA sessions (IQR 3-20), with 50% continuing maintenance GMA, and 73% started GMA after primary non-response to tofacitinib.
- No adverse events related to the combination therapy were reported, though 36% of patients were switched to a new therapy during follow-up.
- This small retrospective study may inform clinicians managing refractory ulcerative colitis patients with prior exposure to multiple biologics.

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