

TOFACITINIB IN ULCERATIVE COLITIS: THE RELATIONSHIP BETWEEN OCTAVE INDUCTION WEEK 8 SYMPTOMATIC REMISSION AND OCTAVE SUSTAIN WEEK 52 REMISSION

Lucine Vuitton

UEG Week Copenhagen 2023

Poster

IBD

October 15, 2023

Post hoc analysis of OCTAVE trials identifies baseline predictors of symptomatic remission with tofacitinib induction therapy in ulcerative colitis and shows that patients without early symptomatic remission can still achieve efficacy endpoints with maintenance treatment.

KEY POINTS

- Prior tumour necrosis factor inhibitor exposure or failure was associated with lower odds of achieving symptomatic remission at Week 8 (OR 0.44 and 0.42, respectively), while baseline total Mayo score less than 9, lower stool frequency, and lower endoscopic subscore were associated with higher odds (OR 2.82, 3.04, and 2.86, respectively).
- A numerically higher proportion of patients who achieved symptomatic remission after 8 weeks of induction therapy achieved remission at Week 52 of maintenance treatment compared with non-remitters (47.1% vs 34.2% across all tofacitinib doses).
- No differences were observed between symptomatic remitters and non-remitters at maintenance baseline in achievement of corticosteroid-free remission (26.9% vs 26.3%) or sustained corticosteroid-free remission (41.2% vs 41.0%) at Week 52.
- Patients who did not achieve symptomatic remission after 8 weeks of induction treatment could still achieve efficacy endpoints with both tofacitinib 5 mg and 10 mg twice daily maintenance doses at Week 52.

VIEW THIS CONTENT ON GUTFLIX

<https://gutflix.eu/search/d/45261ed6-743b-11ee-a001-0242ac140004>



AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.