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Summary

EARLY REDUCTION OF BOWEL WALL THICKNESS BY TRANSPERINEAL ULTRASONOGRAPHY PREDICTS BIOLOGICS-INDUCED HISTO-ENDOSCOPIC MUCOSAL IMPROVEMENT IN ULCERATIVE COLITIS

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Early reduction in rectal bowel wall thickness at week 1 measured by transperineal ultrasound predicts histo-endoscopic mucosal improvement in ulcerative colitis patients treated with advanced therapies.

KEY POINTS

- In 69 ulcerative colitis patients treated with biologics or tofacitinib, the change in rectal bowel wall thickness at week 1 differed significantly between patients who achieved histo-endoscopic mucosal improvement and those who did not (1.2±0.7 vs. 0.0±1.4 mm, p=0.0043).
- Change in rectal bowel wall thickness at week 1 predicted histo-endoscopic mucosal improvement with an AUC of 0.79 (95% CI 0.65-0.88, p=0.02), while week 8 measurements showed no significant difference between groups.
- Only 11 of 69 patients (16%) achieved the combined endpoint of endoscopic improvement (Mayo endoscopic subscore ≤1) and histological improvement (Geboes score <3.1) after more than 14 weeks of treatment.
- At a 1 mm reduction cut-off, transperineal ultrasound at week 1 demonstrated 70% sensitivity, 75% specificity, and 92.3% negative predictive value for histo-endoscopic mucosal improvement.

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