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Summary

EFFICACY OF SECOND-LINE TREATMENTS FOLLOWING FIRST-LINE VEDOLIZUMAB TREATMENT IN ULCERATIVE COLITIS: A RETROSPECTIVE MULTICENTER STUDY OF GETAID

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UEG Week Vienna 2024 | Poster

IBD

October 13, 2024

A retrospective multicenter study of 203 ulcerative colitis patients found similar corticosteroid-free remission rates at week 14 across anti-TNF, ustekinumab, and JAK inhibitor therapies used as second-line treatment after vedolizumab failure.

KEY POINTS

- At week 14, corticosteroid-free remission rates were 32.6% for infliximab, 25.9% for subcutaneous anti-TNF, 31.7% for ustekinumab, and 43.8% for JAK inhibitors, with the authors concluding these appeared similar between groups.
- One-year treatment persistence was 41.9% overall, with rates of 45.2% for infliximab, 43.3% for subcutaneous anti-TNF, 40.4% for ustekinumab, and 18.8% for JAK inhibitors.
- Discontinuation of second-line treatment was predominantly related to primary failure (34.9%) or secondary failure (50%), rather than adverse reactions (15.1%).
- The overall adverse reaction rate was 15.3%, with infliximab at 19.8%, ustekinumab at 7.8%, and JAK inhibitors at 6.3% with no herpes zoster or thromboembolic events reported.
- This retrospective study from 27 French and Belgian centers is described as the largest real-world evaluation of second-line therapies after vedolizumab in ulcerative colitis.

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