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Summary

A SWEDISH REGISTER-BASED STUDY EVALUATING THE PERFORMANCE OF A CLINICAL DECISION SUPPORT TOOL (CDST) FOR VEDOLIZUMAB IN CROHN'S DISEASE

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A vedolizumab clinical decision support tool (VDZ-CDST) did not predict clinical remission at 52 weeks in adults with Crohn's disease in routine Swedish care, but showed modest associations with biochemical remission, treatment persistence, and surgery-free survival.

KEY POINTS

- Among 816 Swedish adults with Crohn's disease starting vedolizumab, VDZ-CDST categories were not significantly associated with clinical remission at week 52 (p-trend = 0.253, AUC = 0.56).
- The tool showed modest discrimination for clinical remission at week 26 (remission rates 6%, 17%, and 26% across low, intermediate, and high probability groups; AUC = 0.66).
- VDZ-CDST categories were associated with biochemical remission at weeks 26 and 52, with AUC values of 0.64 and 0.61, respectively.
- Treatment persistence differed significantly across score categories, with median time on vedolizumab of 8.3, 27.0, and 44.2 months in low, intermediate, and high probability groups, and differences persisting beyond 5 years.
- The tool combines five baseline factors: prior TNF inhibitor exposure, previous bowel surgery, fistulizing disease history, albumin, and C-reactive protein.

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