

EFFECTIVENESS OF VEDOLIZUMAB DOSE ESCALATION FOR CROHN'S DISEASE IN A LARGE-SCALE, CANADIAN REAL-WORLD COHORT

pauline wils

UEG Week Berlin 2025

Poster

IBD

October 7, 2025

A Canadian real-world study of vedolizumab in Crohn's disease found that patients requiring dose escalation from every 8 weeks to every 4 weeks achieved lower remission rates than those remaining on standard dosing, with shorter baseline disease duration associated with better response to escalation.

KEY POINTS

- At 14 weeks after vedolizumab initiation, remission rates were lower in the dose-escalation cohort compared to the standard-dosing cohort: 47% versus 61% in bio-naïve patients and 22% versus 48% in bio-experienced patients.
- Among patients not in remission at the time of dose escalation to every 4 weeks, 33% achieved remission 3 months after escalation.
- Shorter disease duration at baseline was significantly associated with achieving remission after dose escalation: median 8 months in responders versus 16 months in non-responders ($p=0.007$).
- Treatment persistence at 24 months after dose escalation was 59% in bio-naïve and 53% in bio-experienced patients.
- This prospective study followed 250 patients who escalated dosing and 116 who remained on standard dosing in a Canadian patient support program from 2015 to 2023.

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