

EFFECTIVENESS OF VEDOLIZUMAB DOSE ESCALATION FOR ULCERATIVE COLITIS IN A LARGE-SCALE, CANADIAN REAL-WORLD COHORT

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Poster

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In a prospective Canadian cohort of 673 ulcerative colitis patients on vedolizumab, those requiring dose escalation from every-8-weeks to every-4-weeks achieved lower remission rates than patients maintained on every-8-weeks dosing, with older age and longer disease duration associated with post-escalation remission.

KEY POINTS

- At 14 weeks, remission rates were 49% (bio-naïve) and 42% (bio-experienced) in patients later requiring dose escalation, compared to 72% (bio-naïve) and 70% (bio-experienced) in those maintained on every-8-weeks dosing.
- Among patients not in remission at the time of dose escalation to every-4-weeks, 40% achieved clinical remission 3 months after escalation.
- Patients achieving remission after dose escalation were significantly older at treatment initiation (49 vs 41 years, $p=0.043$) and had longer disease duration (6 vs 3 years, $p=0.029$) than those who did not achieve remission.
- Treatment persistence at 24 months after dose escalation was 39% in bio-naïve and 45% in bio-experienced patients.
- This real-world data from a patient support program (2015-2023) may inform clinicians managing ulcerative colitis patients with inadequate response to standard vedolizumab dosing.

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