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Summary

VEGF-RELATED ANTIBODIOME CHARACTERIZES PATIENTS WITH CROHN'S DISEASE AND DIFFERENTIATES THE LOCATION OF INFLAMMATION

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UEG Week Copenhagen 2023 | Poster

IBD

October 15, 2023

A study of 66 patients with active Crohn's disease found that serum levels of autoantibodies against VEGF-A and its receptors distinguish patients with isolated colonic disease from those with ileal involvement.

KEY POINTS

- Compared to 197 healthy controls, Crohn's disease patients had significantly lower levels of autoantibodies against VEGF-A, VEGFR1, and VEGFR2, and significantly higher levels of autoantibodies against AT1R, with no difference in anti-ETAR levels.
- All VEGF-related autoantibodies were significantly lower in patients with isolated colonic disease compared to those with ileal involvement, discriminating between these locations with AUC values ranging from 0.72 to 0.77.
- In isolated colonic disease, correlations between autoantibodies were strongly positive (r=0.5-0.9) and CRP correlated positively with VEGF-A (r=0.6) but negatively with VEGF-related autoantibodies; these correlations were absent or less pronounced in patients with ileal involvement.
- The authors suggest this antibodiome profile may represent a laboratory signature for disease location in Crohn's disease, though these differences were independent of steroid and azathioprine treatment requirements.

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