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Summary

PRA023 IMPROVED HEALTH-RELATED QUALITY OF LIFE AS MEASURED BY IBDQ-32 IN A PHASE 2 TRIAL FROM PATIENTS WITH MODERATELY TO SEVERELY ACTIVE ULCERATIVE COLITIS

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Post hoc analysis of the phase 2 ARTEMIS-UC trial demonstrates that PRA023, a monoclonal antibody targeting TL1A, significantly improved health-related quality of life measured by IBDQ-32 in patients with moderately to severely active ulcerative colitis after 12 weeks of induction therapy.

KEY POINTS

- 82.4% of PRA023-treated patients achieved IBDQ response compared to 49.3% receiving placebo (difference 33.1%, p<0.0001), and 51.5% achieved IBDQ remission compared to 19.4% with placebo (difference 32.1%, p=0.0001) at week 12.
- All four IBDQ domain subscores showed statistically significant improvement with PRA023 versus placebo: bowel symptoms (difference 9.4 points, p<0.0001), emotional function (difference 8.9 points, p=0.0002), systemic symptoms (difference 4.0 points, p=0.0002), and social function (difference 4.4 points, p=0.0004).
- The benefits of PRA023 on IBDQ remission were consistent regardless of prior advanced therapy exposure, with placebo-adjusted differences of 34.4% in patients with prior advanced therapy and 30.0% in those without.
- This analysis included 135 patients with moderately to severely active UC who had history of insufficient response, loss of response, or intolerance to conventional or advanced therapies, and who received either intravenous PRA023 or placebo over 12 weeks.

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