

ENDOSCOPIC PATIENT CLUSTERING TO INVESTIGATE DIFFERENTIAL TREATMENT EFFECTS OF GUSELKUMAB AND USTEKINUMAB IN CROHN'S DISEASE: POST-HOC ANALYSIS OF GALAXI AND GRAVITI TRIALS

Raja Atreya

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Poster

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Endoscopic clustering identified seven Crohn's disease subtypes with differential treatment responses, showing guselkumab demonstrated superior endoscopic efficacy over ustekinumab, particularly in ileal and strictured disease.

KEY POINTS

- Seven endoscopic Crohn's disease subtypes were identified using segmental Simple Endoscopic Score clustering in 1758 patients from Phase 3 GALAXI trials, revealing heterogeneity beyond Montreal classification.
- Guselkumab showed higher overall endoscopic remission rates than ustekinumab at Week 12 and Week 48 across all patients.
- In 38% of patients with ileum-only disease or strictured right colon, guselkumab achieved endoscopic remission rates of 19-20% at Week 12 while ustekinumab showed placebo-like efficacy at 2-7%.
- In the mixed ileocolonic/colonic group representing 62% of patients, guselkumab and ustekinumab showed similar Week 12 remission rates (26% versus 27%), but guselkumab was superior at Week 48 (39-44% versus 30%).
- Guselkumab responders with baseline stricturing showed greater reduction in narrowing than non-responders, contributing to 21% versus 5% reduction in total endoscopic scores, suggesting potential effects on stricture biology.

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