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Summary

LONG-TERM EFFICACY AND SAFETY OF TEZEPELUMAB OVER 52 WEEKS IN ADULTS AND ADOLESCENTS WITH EOSINOPHILIC ESOPHAGITIS: RESULTS FROM THE PHASE 3 CROSSING STUDY

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The phase 3 CROSSING trial demonstrated that tezepelumab, a TSLP-blocking monoclonal antibody, achieved sustained histologic remission in 64–69% of adults and adolescents with active eosinophilic esophagitis at 24 and 52 weeks versus 3.5–5.4% with placebo.

KEY POINTS

- At week 24, histologic remission (≤6 eosinophils per high-power field) occurred in 64.8% of patients receiving tezepelumab 210 mg every 4 weeks and 68.9% receiving 420 mg versus 3.5% with placebo ($p<0.001$ for both doses).
- Histologic remission was sustained at week 52 in 67.8% (210 mg) and 63.3% (420 mg) of tezepelumab-treated patients versus 5.4% with placebo ($p<0.001$ for both doses).
- Tezepelumab significantly improved dysphagia symptoms (DSQ score) at week 52, with placebo-adjusted least-squares mean differences of □8.91 for the 210 mg dose and □10.84 for the 420 mg dose ($p<0.001$ for both); symptom improvement was observed as early as week 4.
- Endoscopic features (EREFS) improved significantly at week 52, with placebo-adjusted least-squares mean differences of □3.32 for the 210 mg dose and □3.10 for the 420 mg dose ($p<0.001$ for both); approximately 30% of tezepelumab recipients achieved total endoscopic remission.
- The overall incidence of adverse events and serious adverse events was comparable across tezepelumab and placebo groups, with no new safety signals identified.

– This is the first phase 3 biologic trial in eosinophilic esophagitis to include a 52-week double-blind placebo-controlled treatment period.

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