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Summary

TO WHAT EXTENT ARE PHYSICIANS CYCLING THROUGH MORE THAN ONE TNFI (TUMOR NECROSIS FACTOR INHIBITOR) IN ULCERATIVE COLITIS (UC) TREATMENT?

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A survey of 1430 ulcerative colitis patients across five European countries shows a statistically significant reduction in TNF inhibitor cycling from 41% in Q1 2021 to 32% in Q3 2023, with physicians increasingly switching to non-TNFi therapies at second line based on patient characteristics.

KEY POINTS

- Among 485 UC patients on second-line advanced therapy in Q3 2023, 32% cycled through two TNFi treatments while 59% switched from a TNFi to a non-TNFi, representing a significant decrease in TNFi cycling compared to 41% in Q1 2021 ($p<0.05$).
- TNFi treatments remain dominant first-line therapy, prescribed to 81% of EU5 UC patients requiring advanced treatment, most commonly adalimumab or infliximab.
- Patients switching to non-TNFi at second line were more likely to be younger (51% under 40 vs 41%), have no comorbidities (44% vs 27%), present with blood in stool and bowel incontinence (45% vs 20%), and have increasing UC flare rates (29% vs 15%), all statistically significant differences.
- The data suggest physicians are selecting between TNFi cycling and direct switch to non-TNFi based on patient characteristics and disease status, reflecting changing treatment patterns with wider non-TNFi availability.

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