EFFICACY OF INDUCTION UPADACITINIB THERAPY IN EAST ASIAN PATIENTS WITH MODERATELY TO SEVERELY ACTIVE CROHN'S DISEASE

Shu-Chen Wei

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Post hoc analysis of two induction trials found upadacitinib 45 mg once daily superior to placebo for clinical and endoscopic outcomes in East Asian patients with moderately to severely active Crohn's disease over 12 weeks.

KEY POINTS

- At week 12, clinical remission per stool frequency and abdominal pain score was achieved by 62.5% of patients receiving upadacitinib versus 20.6% receiving placebo (nominal P < .0001), and clinical remission per CDAI by 50.7% versus 20.6% (nominal P < .0001).
- Endoscopic response occurred in 61.8% of upadacitinib-treated patients versus 10.3% of placebo patients (nominal P < .0001), and endoscopic remission in 27.9% versus 5.9% (nominal P < .0001).
- Among patients taking corticosteroids at baseline, 57.1% receiving upadacitinib discontinued corticosteroids and achieved clinical remission per CDAI versus 20.0% receiving placebo (nominal P < .0001).
- Adverse event rates were comparable between upadacitinib (69.9%) and placebo (70.6%); no treatment-emergent deaths, malignancies, major cardiovascular events, or venous thromboembolic events were reported.
- The analysis included 204 East Asian patients (68 placebo, 136 upadacitinib) from China, Japan, Korea, Malaysia, and Taiwan enrolled in the U-EXCEL and U-EXCEED studies.

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