

INCREMENTAL IMPROVEMENT IN BOWEL URGENCY WAS ASSOCIATED WITH IMPROVED PATIENT-REPORTED OUTCOMES: POST HOC RESULTS FROM LUCENT-1 AND -2 TRIALS

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Poster

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In two phase 3 ulcerative colitis trials, each single-point reduction in bowel urgency severity on a 0-10 scale was associated with incremental improvements in fatigue, quality of life, physical and mental health, and work productivity among patients treated with mirikizumab.

KEY POINTS

- The analysis evaluated 868 patients at Week 12 and 365 patients at Week 52 from the LUCENT-1 induction and LUCENT-2 maintenance trials of intravenous and subcutaneous mirikizumab versus placebo in moderately-to-severely active ulcerative colitis.
- Bowel urgency was measured using the Urgency Numeric Rating Scale (0-10), with incremental improvement assessed as reduction of each single point from baseline.
- At Week 12, fatigue and inflammatory bowel disease questionnaire scores showed the greatest percent improvements among all patient-reported outcomes for each 1-point reduction in urgency severity, with similar results observed at Week 52.
- Greater reductions in urgency corresponded to larger improvements across all outcomes, with reductions of more than 7 points associated with improvements of 73.6-88.1% for fatigue, 75.4-87.6% for quality of life, and 38.5-54.8% for work productivity loss.
- This material may be most relevant to gastroenterologists treating ulcerative colitis and researchers interested in patient-reported outcomes and symptom management in inflammatory bowel disease.

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