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Summary

THE URGENCY NUMERIC RATING SCALE: PSYCHOMETRIC EVALUATION IN ADULTS WITH CROHN'S DISEASE

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Psychometric validation of the Urgency Numeric Rating Scale in adults with moderately to severely active Crohn's disease establishes thresholds for meaningful improvement and remission of bowel urgency.

KEY POINTS

- Analysis of 1065 adults from the VIVID-1 Phase 3 trial of mirikizumab demonstrated that the Urgency NRS (an 11-point scale assessing bowel urgency severity in the previous 24 hours) has good test-retest reliability, with intraclass correlation coefficients of 0.86 and 0.78 for stable patients.
- The Urgency NRS showed moderate correlations with patient-reported outcomes including PGRS, IBDQ Bowel Symptom domain, IBDQ total score, and CDAI score at Weeks 12 and 52, and was able to detect change and differentiate between known distinct patient groups.
- Anchor-based analysis indicated that a 3 to 5 point reduction in Urgency NRS score represents clinically meaningful improvement and a score of 2 or lower represents bowel urgency remission in this population.
- Mean Urgency NRS weekly average scores decreased from 6.6 at baseline to 2.9 at Week 52 in the pooled treatment arms.
- The findings support use of the Urgency NRS for assessing treatment benefits in Crohn's disease clinical trials.

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