gutflix
GI learning, personalised

Summary

CORRELATING ESOPHAGEAL DISTENSIBILITY WITH HISTOLOGIC AND ENDOSCOPIC MARKERS OF EOSINOPHILIC ESOPHAGITIS IN PATIENTS TREATED WITH DUPILUMAB OR PLACEBO: 24-WEEK RESULTS FROM THE REMODEL TRIAL

Thomas Greuter

UEG Week Barcelona 2026 | Presentation

Mechanisms & Personalised Medicine | Oesophagus | Immunology

October 19, 2026

In the phase 4 REMODEL trial, dupilumab improved esophageal distensibility plateau diameter at 24 weeks in adults with eosinophilic esophagitis, and post hoc analysis showed modest to moderate correlations between improvements in distensibility and histologic and endoscopic outcomes.

KEY POINTS

- Dupilumab 300 mg weekly improved esophageal distensibility plateau diameter by approximately 1.3 mm compared with placebo at Week 24 in 69 randomized adults with active EoE.
- In dupilumab-treated patients, improvements in distensibility plateau diameter showed nominally significant negative correlations with improvements in peak eosinophil count (r = -0.33, P = 0.046), EREFS total score (r = -0.39, P = 0.019), EoEHSS grade (r = -0.44, P = 0.0075), and EoEHSS stage (r = -0.55, P = 0.0007).
- In placebo-treated patients, all correlations were non-significant and generally positive, except for endoscopic features.
- The modest to moderate correlations suggest that distensibility plateau diameter measured by EndoFLIP reflects a related but distinct aspect of EoE compared with histologic and endoscopic measures.
- The analysis supports the use of distensibility plateau diameter as a complementary endpoint that may provide additional insight into longitudinal EoE treatment response.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/a1920d74-d12b-11f1-bc55-daaa6dbee0a2

AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.