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Summary

APOB-48: A PROMISING BIOMARKER FOR RESPONSE TO APRAGLUTIDE IN SHORT BOWEL SYNDROME WITH INTESTINAL FAILURE AND COLON-IN-CONTINUITY

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A phase 2 study in 9 adults with short bowel syndrome with colon-in-continuity found that apraglutide, a long-acting GLP-2 analog, significantly increased plasma ApoB-48 levels at all measured timepoints over 48 weeks, suggesting ApoB-48 may be a suitable biomarker for treatment response in this population.

KEY POINTS

- ApoB-48 levels increased significantly from baseline at 4, 24, and 48 weeks of apraglutide treatment, with median values rising from 1,001 ng/mL to 1,978 ng/mL by week 48.
- At baseline, ApoB-48 levels correlated positively with preserved small intestinal length (r=0.7983).
- Intestinal fatty-acid binding protein (iFABP) showed a significant increase at 24 weeks but remained stable at 4 weeks and did not reach significance at 48 weeks.
- Lipopolysaccharide-binding protein (LBP) concentrations were not significantly affected by apraglutide at any timepoint.
- The authors propose ApoB-48 as a candidate biomarker that reflects both enterocyte mass and functional capacity for nutrient absorption, particularly lipids, in patients with short bowel syndrome and colon-in-continuity where citrulline may be less informative.

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