

UPADACITINIB IN THE TREATMENT OF ULCERATIVE COLITIS AFTER LIVER TRANSPLANTATION FOR PRIMARY SCLEROSING CHOLANGITIS - A CASE SERIES

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Poster

IBD

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A case series of five ulcerative colitis patients after liver transplantation for primary sclerosing cholangitis showed clinical and endoscopic improvement with upadacitinib after failure of vedolizumab or combination biologic therapy.

KEY POINTS

- Five patients (median age 30 years, median 7 years post-transplant, median 12 years UC duration) received upadacitinib after failure of vedolizumab in four cases and vedolizumab plus infliximab in one case
- Partial Mayo score decreased from a median of 6 to a median of 2 during a median follow-up of 9 months, with clinical response confirmed in all patients
- Endoscopic Mayo scores improved in all four patients who underwent follow-up endoscopy, with two patients achieving scores of 0 and 1 from baseline of 3
- Adverse effects were mild and included acne, upper respiratory tract infection, CMV colitis, and mild COVID-19 infection, with no changes in liver function tests or tacrolimus levels
- The authors conclude that upadacitinib appears to be an effective and safe option for active IBD after liver transplantation following failure of previous biologic therapy

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