

MAINTENANCE OF WEEK 12 RESPONSES THROUGH WEEK 52 WITH ETRASIMOD IN PATIENTS WITH MODERATELY TO SEVERELY ACTIVE ULCERATIVE COLITIS: POST HOC ANALYSIS OF THE PHASE 3 ELEVATE UC 52 TRIAL

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Poster

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Post hoc analysis of the ELEVATE UC 52 trial shows that among patients with moderately to severely active ulcerative colitis treated with etrasimod who achieved clinical, endoscopic, or symptomatic endpoints at Week 12, approximately two-thirds to three-quarters sustained those responses at Week 52.

KEY POINTS

- Among 81 etrasimod-treated patients achieving clinical remission at Week 12, 66.7% sustained remission at Week 52, while 72.2% of those achieving endoscopic improvement and 63.6% achieving endoscopic improvement-histologic remission sustained those endpoints.
- Symptomatic measures showed higher maintenance rates, with 74.6% of patients sustaining symptomatic remission and 75.3% sustaining rectal bleeding subscore of 0 from Week 12 to Week 52.
- The ELEVATE UC 52 trial randomized 289 patients 2:1 to etrasimod 2 mg once daily or placebo, using a treat-through design with 12-week induction followed by 40-week maintenance.
- Loss of response or treatment discontinuation ranged from 24.7% to 36.4% across different efficacy endpoints among Week 12 responders.
- The authors note that larger sample sizes with longer follow-up are needed to evaluate long-term efficacy; this material would be most relevant to gastroenterologists managing ulcerative colitis and those evaluating sphingosine 1-phosphate receptor modulators.

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