gutflix
GI learning, personalised

Summary

EFFICACY AND SAFETY OF DUVAKITUG MAINTENANCE THERAPY IN PATIENTS WITH CROHN'S DISEASE (CD): RESULTS FROM THE PHASE 2B RELIEVE UCCD LONG-TERM EXTENSION STUDY

Walter Reinisch

UEG Week Barcelona 2026 | Presentation

Mechanisms & Personalised Medicine | IBD

October 20, 2026

Duvakitug maintenance therapy (450 mg or 900 mg subcutaneous every 4 weeks) demonstrated high rates of endoscopic response and clinical response/remission at week 44 in patients with moderately to severely active Crohn's disease who had responded to induction therapy.

KEY POINTS

- At week 44 of maintenance (58 weeks total exposure), endoscopic response (≥50% improvement in SES-CD) was achieved by 41% of patients receiving duvakitug 450 mg and 55% receiving 900 mg.
- Clinical remission (CDAI <150) was achieved by 81% (450 mg) and 84% (900 mg) of patients, and clinical response (≥100-point CDAI decrease) by 81% (450 mg) and 87% (900 mg).
- Duvakitug appeared to demonstrate a dose response across efficacy endpoints.
- Treatment-emergent adverse events occurred in 70% (450 mg) and 77% (900 mg) of patients, most were mild to moderate in severity, and the most common were upper respiratory infections.
- Adverse events leading to discontinuation occurred in 6% of patients in each dose group, and no new safety concerns were observed.
- This phase 2b maintenance study supports duvakitug as a potentially effective and durable treatment option for Crohn's disease and is being further evaluated in phase 3.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/0519bf96-d12b-11f1-814f-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.