CENDAKIMAB EFFICACY AND SAFETY IN ADULT AND ADOLESCENT PATIENTS WITH EOSINOPHILIC ESOPHAGITIS: 24-WEEK RESULTS FROM THE RANDOMIZED, PLACEBO-CONTROLLED, PHASE 3 STUDY

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Endoscopy | IBD | Mechanisms & Personalised Medicine | Oesophagus

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Phase 3 trial demonstrates that cendakimab 360 mg weekly significantly improved dysphagia, eosinophil counts, and endoscopic features in adults and adolescents with active eosinophilic esophagitis at 24 weeks.

KEY POINTS

- Cendakimab 360 mg weekly reduced dysphagia days by 6.1 versus 4.2 with placebo (difference −1.9 days, 95% CI −3.0 to −0.8, P=0.0005) and achieved histologic response (≤6 eosinophils/hpf) in 28.6% versus 2.2% with placebo (difference 26.4%, 95% CI 20.6 to 32.2, P<0.0001).
- Histologic response below 15 eosinophils/hpf was achieved in 43.1% of cendakimab-treated patients versus 3.1% with placebo (P<0.0001), and endoscopic severity (EREFS score) improved by −5.2 versus −1.2 with placebo (P<0.0001).
- Efficacy in the steroid inadequate responder or intolerant subgroup (approximately 65% of patients) was comparable to the overall population.
- Adverse events related to study drug occurred in 30.3% with cendakimab and 18.9% with placebo, with discontinuations due to adverse events in 1.4% and 0.7%, respectively, and no deaths.
- Cendakimab is a monoclonal antibody that neutralizes IL-13 by blocking binding to both IL-13Rα1 and IL-13Rα2 receptors.

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