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Effectiveness of third-class biologic treatment in Crohn's disease: a multi-center retrospective cohort study

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Background:

Multiple studies described the effectiveness of ustekinumab (UST) and vedolizumab (VDZ) in CD patients failing anti-TNFs. However, the effectiveness of VDZ or UST as a third-class biologic has not yet been described.

Aim:

We aim to investigate and compare the effectiveness of VDZ and UST as a third-class biologic in patients with CD.

Methods

This was a retrospective multicenter cohort study. We included CD patients who received three different classes of biological. The primary outcome was clinical response (≥3 reduction in Harvey-Bradshaw Index (HBI)) at week 16, and secondary outcomes were clinical remission (HBI < 4), C-reactive protein (CRP)-normalization, adverse events, corticosteroid-free remission, and response at both week 16 and 52.

Results:

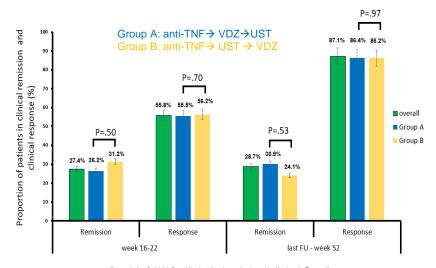
	over all number	Group A	Group B	P-value
		156		P < 0.0001
Patients number, N (%)	204	(76.47%)	(23.52%) 48	
		32-) 43.6		
Age , median (IQR)	(32-53) 41.5	(52.7	(31-54.7) 43.5	P = 0.9650
Gender-male, N (%)	(47.05%) 96	(47.43%) 74	(45.83%) 22	P = 0.8458
Disease duration, median		10-) 15	11-) 16.5	
(IQR)	(10.25-22) 16	(20.75	(25.75	P = 0.1370
Location (N,%)	-			
ileum	(22.54%) 46	(21.7%) 34	(% 25)12	P = 0.6424
colon	(20.09%) 41	(23.07%)36	(10.14%) 5	P = 0.0627
ileocolonic	(52.45%) 107	(50%) 78	(60.4%) 29	P = 0.2079

At week 16-22: clinical response: 87/156(55.5%) and 27/48 (56.2) (p=0.70). clinical remission: 41 /156 (26.2%) and 15 /48 (31.2%) (p=0.50). in groups A and B respectively

At week 52; clinical response: 89/103 (86.4%) patients, and 25/29 (86.2%) (p=0.9)

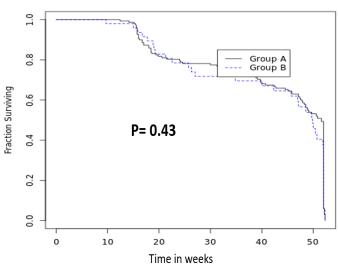
clinical remission; 31/103 (30%) and 7/29 (24.1%) (p=0.5) in groups A and B respectively

<u>Treatment discontinued</u>: 26/156 (17.3%) in group A and 9/48 (18.75%) in group B. The mean reason for discontinuation of treatment was clinical failure.



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Kaplan-Meier Survival by group



Conclusion:

The current study demonstrates that administering a third-class biological therapy is effective in more than half of the patients with CD, who have already failed two classes of biological drugs. No difference in effectiveness was detected between VDZ and UST as a 3rd class agent.