TUMOR NECROSIS FACTOR INHIBITORS: UTILITY OF PHARMACOKINETICS MONITORING IN INFLAMMATORY BOWEL DISEASE MANAGEMENT


BACKGROUND:

Infliximab (IFX) and adalimumab (ADA) are two monoclonal antibodies (inhibitors of tumor necrosis factor alpha (anti-TNF)) that have revolutionized the management of patients with inflammatory bowel disease (IBD). However, it’s required an adequate individualization of the therapy in order to optimize it.

PURPOSE:

To describe the pharmacokinetic determinations of serum levels of IFX and ADA in patients with inflammatory bowel disease and to evaluate its impact on clinical decision making.

MATERIAL AND METHODS:

Retrospective observational study (2017) in a General Hospital. Variables collected to request monitoring: sex, age, weight, drug, diagnosis and reason for the request.

RESULTS:

Patients
71 determinations
49 patients

60% men
45.6±15,4 years
63% Crohn; 37% Colitis

57% ADA; 43% IFX

Anti-TNF serum level

OD
•2%
•46%

IR
•35%
•22%

UD
•63%
•32%

Acceptance recommendation

ADA: 5.0 ± 4.0 mcg / mL (0.1 -12.3)
IFX: 6.4 ± 3.9 mcg / mL (1-18.5)

DISCUSSION AND CONCLUSION:

Results show a high percentage of patients with inadequate anti-TNF serum levels that support the use of anti-TNF pharmacokinetic monitoring as an useful tool in clinical decision making.

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