**INTENSIFICATING THERAPY WITH USTEKINUMAB IN NON-FIRST LINE CROHN’S DISEASE: CLINICAL EXPERIENCE, SAFETY AND EFFECTIVENESS IN THE “REAL WORLD”**

(1)Portillo-Haro S.; (1)Madrid-Paredes A.; (2)Tejedor-Tejada E.; (1)Nieto-Sánchez M.T.

(1)San Cecilio Hospital, Granada, Spain  (2)Torrecárdenas Hospital, Almería, Spain

Any question? Contact us in: sergiof.portillo.sspa@juntadeandalucia.es

**BACKGROUND AND IMPORTANCE**

Ustekinumab (UST) is a real option for treating Crohn disease (CD) refractory to anti-TNF drugs. After a first intravenous (iv) dose, it is administered a subcutaneous (sc) maintenance dose every 8-12 weeks (w). Some observational studies display that a dosage interval shortening (DIS) may improve clinical results in patients with partial response or early exhaustion of response between different doses.

**AIM AND OBJECTIVES**

- Quantifying proportion of patients treated with UST who require DIS.
- Assessing effectiveness and safety of DIS with UST in CD refractory.

**MATERIAL AND METHODS**

Observational and retrospective research in adult patients with CD refractory to anti-TNF drugs. Patients started treatment with UST, firstly iv 6mg/kg, and then sc 90mg every 8 weeks. DIS in June,2019-February,2021; with later follow-up of 6m at least.

Effective: 1.Clinical remission (CRem), obtaining an Harvey-Bradshaw Index (HBI)<4 2.Clinical response (CResp), reduction of >3 points in HBI respect baseline. Both endpoints were evaluated at 3 and 6 m.

Tolerance/safety: determined at 3 and 6 months. Also discontinuations or adverse events.

**RESULTS**

N=41 (21 MEN) UST DURING 1Y AT LEAST 1.6 PREV. BIOLOGIC TREATMENT

DIS? REASON?

| DIS (PARTIAL RESPONSE) |
| DIS (EARLY EXHAUSTION OF RESPONSE) |
| DIS ANY REASON |
| 26 (9/41; 63.4%) |
| MAINTAINING INITIAL POSOLOGY 15;36.6% |

**CONCLUSION AND RELEVANCE**

A high number of patients have required DIS with UST. DIS of UST have shown high safety and ability for rescuing a substantial percentage of patients with partial response or early exhaustion of response. Effectiveness results are similar at 3 and 6m after intensification, which might be important to make decisions about treatment earlier.